

# The Effectiveness of the Adults and Children Together - Parents Raising Safe Kids Program in Reducing Behavioral and Emotional Problems among Preschool Children

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## Abstract

**Introduction:** The Adults and Children Together - Parents Raising Safe Kids (ACT-PRSK) program is an evidence-based approach that was proposed by the American Psychological Association (APA). The present study was carried out in order to examine the effectiveness of the ACT-PRSK program in reducing behavioral and emotional problems among preschool children.

**Method:** The present experiment was a quasi-experimental study that was conducted using a pretest-posttest-follow up design with a control group. The study sample consisted of 32 parents of preschool children that had symptoms of behavioral and emotional problems. The participants were randomly assigned into an experimental group and a control one (each containing 16 individuals). The experimental group received ACT-PRSK program.

**Results:** The results of mixed analysis of variance and Bonferroni test showed that the ACT-PRSK program was significantly effective in reducing behavioral and emotional problems except for psychosomatic problems among the experimental parents' children. Moreover, the effects of the intervention were stable after 2 months.

**Conclusion:** This educational program focuses on parent-child interaction, enhances the parents' understanding of their children's behaviors and emotions, and models appropriate behavioral styles, which leads to a change in the parents' attitude, and thus, results in a change in the parents' behavior while interacting with their children. It seems that a change in interaction to a large extent leads to a change in the children's behavior.

**Keywords:** Parent Education, ACT-PRSK Program, Behavioral and Emotional Program, Preschool Children

## Introduction

Early years of childhood are considered as a critical period when the child learns basic inter-personal and self-controlling skills [1, 2]. In this period, children as one of the vulnerable groups are exposed to various types of psychological problems. On one hand, vulnerability is due to the active process of growing up and its special requirements; and on the other hand, it is affected by environmental and situational conditions [3]. This research indicates the importance of children's early environments especially families. This is why this research highly emphasizes the active role of parents' behavior, child-caring and child-supporting methods, and considers the factors as affecting factors in the emergence, increase and/or balancing child's ill-behaviors [4]. Behavioral and emotional problems of children first emerge in the early years of their lives before school age which can tend to remain throughout their childhood and adolescence if not dealt with properly [5, 6]. Based on DSM-5 criteria, behavioral and emotional problems which are considered a subgroup of

behavioral disorders and motive control include forms with some issues of behavioral and emotional self-control which violate others' rights or can seriously contradict with social norms or authorities in power. Adler asserts that children's behavioral problems such as aggression and bullying indicate the existence of a feeling of contempt in the children which are expressed as forms of aggression aiming at achieving superiority over others [7]. Clearly, emotional and behavioral disorders are very common and crippling disorders which cause serious problems for teachers, families and children themselves [8] and remarkably impacts children's educational and social achievements, and is considered a negative pre-awareness of years to come [9]. These problems greatly affect parents stress, and parents are very likely going to experience other stressors such as social, economic and emotional stressors related to children characteristics [10]. On the other hand, parents' stress can lead to an increase in children's emotional and behavioral problems causing more severe cases [11]. Emotional and behavioral problems are generally divided into two groups of internalizing and externalizing problems. Externalizing problems circle around the outside and emerge as extroversion, pugnacity and disobedience, and internalizing problems tend to deal with the inside such as depression, anxiety and reticence [12].

Increasing behavioral and emotional problems during recent years has been a bug concern for researchers in the field of children [13]. Studies conducted in various countries show that in the U.S, 23.1% of children and adolescents have behavioral disorders [14], the figure is 21% for Danish students [15], and it is 8-19% for students in Utopia, Sudan and India. In Iran, the figure has been estimated as 12.9% and 12.3%, for internalizing and externalizing social classes [16]. Also, the figure for children in the city of Hamadan is 20.48%, 20.2% for children in Isfahan [17], 22.1% for children in Yazd [18]. Also, Pour-Hossein et al. conducted a study in 2015 suggesting that the most prevalent disorders among male elementary students are hyper activism and lack of attention (6.1%), and among female elementary students are emotional, reactive and affective problems (17.2%) [19]. Epidemiology studies suggest that factors such as family issues, divorce, not having an intimate relationship with one's parents, insecure attachment to somebody, inadequate care, inflexible and harsh rules, and parents' psychological illnesses can increase the possibility of developing emotional and behavioral disorders among children [20, 21].

Since emotional and behavioral problems are not usually alleviated naturally [19], and can lead to big crimes and felonies in adulthood, if not dealt with properly in childhood, as approximately 40% of children with emotional and behavioral disorders develop antisocial tendencies [22], also since the disorders can lead to drug abuse, criminal activities, posterior disorders, learning disabilities, neuropsychological disorders and borderline disorder [23, 24], the importance of finding early remedies for emotional and behavioral disorders is revealed. Educational programs which focus on child-parents

interaction are considered as the most common and successful approach to the prevention of problematic behaviors among children [25-27]. The ACT-PRSK program is a prevention program which focuses on child-parents interaction which has been presented by the APA teaches the skills of raising a child to parents or other main caretakers [2, 28]. The program consists of four components which are anger management, pro-social problem solving, positive discipline, and the effects of media violence literacy [29-32]. Based on the APA's criteria (2016), the ACT-PRSK program aims to provide parents with required training and to help them understand:

1. The comprehension ability of children and changes occurring in them due to their age and different phases of growing up.
2. Children copy their parents' and other adults' behaviors and the copied behaviors have long-term effects on children growing up.
3. Children's first experiences of their parents violence has long-term effects on them.
4. We can prevent factors causing violence if we know them well.
5. It is of high importance to monitor children's behaviors at school and in the society to be able to prevent violent behaviors.

In a study conducted by Porter and Howe in 2008, it was suggested that parents who received the ACT-PRSK program showed a meaningful progress in the four components included in the program compared to other groups. Also, Knox, Burkhart and Howe in 2011 conducted a quasi-experimental study suggesting that the children of parents who received the program showed a meaningful decrease in their behavioral problems and aggressive behaviors. In a study conducted by Kaminski et al. during 2008, the effect of the program on decreasing behavioral problems among under-7-year-old children was confirmed [33]. The studies confirm the positive effect of the program on the decrease of children's behavioral problems and on teaching proper child-raise methods to parents. Considering the prevalence of emotional and behavioral problems among children and their effects on children's future educational achievements, interpersonal relationships and parents' concern and anxiety, mental health and subsequently family and social health, is of high importance in order to prevent the emergence of such problems from elementary schools. Hence, the current study aims to investigate the effects of the ACT-PRSK program on the decrease of behavioral and emotional problems among elementary school children. The main hypothesis is that the ACT-PRSK program has an effect on behavioral and emotional problems among preschool children.

## Methods

The current study is a quasi-experimental with pre-test, post-test and follow-up and a control group. The participants were the parents of elementary school children (5-7 year old) in Shahindejh in 2016. The sample

included parents of 32 children whose children got a mark of over 72 in Conners' Parent Rating Scale (CPRS).

At first, the scale was handed out in all the elementary schools in the city (in all 5 existing elementary schools) and after collecting and correcting the questionnaires, a list of parents whose children got a mark of over 72 and were analyzed for emotional and behavioral problems was made among whom 47 parents were randomly chosen and finally 32 parents were chosen among those willing, and were divided into two groups of experiment (16 parents) and control (16 parents). After clarifying the purpose of the study and after the willingness of parents to cooperate, 8 ACT-PRSK sessions of 90-120 minutes were held for two months for the experiment group. One week after the sessions, both groups took the post-test and follow-up was conducted after two months.

*The following tools were used throughout this research: Conners' Parent Rating Scale (CPRS):*

The questionnaire was designed by Goyett, Conners and

Ulrich in 1987 which consists of 48 items and 8 subscales. The reliability and validity of the scale have been confirmed in many studies conducted in various countries (34). Results of studies showed the scale's internal homogeneity between 41 and 57% (35). Al-Awad & Sonuga-Barke in 2002 stated the validity of the scale as 83% and regarded the internal parallelism of various subscales as desirable [36]. In Iran, Shahaiean and colleagues conducted a study suggesting that the validity of re-experimentation was 58% for the total mark, and the figure was 76% for psychosomatic problems; 64% for behavior; 62% for shyness-anxiety; and 41% for social problems [34].

**ACT- PRSK sessions:**

The ACT- PRSK program was presented in 2001 by APA, and was revised in 2006 and 2011(1). ACT- PRSK teaches positive skills of child-raise to parents and other main caregivers (A.P.A, 2016). A summary of the contents is as follows:

**Table 1.** ACT- PRSK program sessions

|  |
|--|
| <p>Week 1 Understanding your child's behaviors<br/>                     What is the definition of child development?<br/>                     Children need to have their basic needs met in order to behave well.<br/>                     Adults who understand child development know what a child can do and understand at different ages.<br/>                     Adults who understand child development know what to expect from their children and treat their children like children.<br/>                     Adults who understand child development become less frustrated or anxious about their children's behavior and are less likely to use verbal and physical abuse.</p> |
| <p>Week 2 Children and violence<br/>                     The first years are very important learning years. They are when children learn basic lessons that will last for life.<br/>                     Children learn by observing and imitating those around them.<br/>                     Adults need to be positive examples and pay attention to what they do and say in front of children.<br/>                     A combination of individual and societal factors makes a child become involved with violence.<br/>                     Violence in a child's life can have long-term effects.</p>  |
| <p>Week 3 Understanding and controlling anger<br/>                     Conflicts with other people are part of our life.<br/>                     Anger is a normal emotion.<br/>                     It is OK to feel angry, but is not OK to use violence.<br/>                     Adults can learn to control their angry feelings.<br/>                     It is important to learn how to resolve conflicts without violence.</p>   |
| <p>Week 4 Resolving conflicts in a positive way<br/>                     Anger is a normal emotion.<br/>                     Children can learn to control their angry feelings, calm down, and resolve conflicts without using violence.<br/>                     How parents can help children deal with anger.</p>  |
| <p>Week 5 Positive discipline<br/>                     It is normal for children to misbehave because they are learning how to understand their world and how to relate to others.<br/>                     Discipline involves calming down and teaching children how they should behave at different ages and in different situations.<br/>                     Parenting styles have an important impact on children's behavior.</p>  |
| <p>Week 6 Positive discipline<br/>                     It is possible to prevent challenging behaviors by promoting positive behaviors and avoiding problematic situations.<br/>                     Parents need to use discipline methods that fit the situation and the children's age and stage of development.</p>  |
| <p>Week 7 Reducing the influence of media on children<br/>                     High exposure to violence in the media can lead to an increase in aggressive attitudes and behaviors.<br/>                     Parents can learn ways to reduce children's exposure to violence in the media and its negative impact.</p>   |
| <p>Week 8 Review of adults' role in raising safe kids<br/>                     Review of major points covered<br/>                     Adults' role in raising safe kids at home and in the community.</p>   |

## Results

Results of Box's **M** test for homogeneity of covariance matrices showed that  $F_{(120, 2791)}$  equals to 301.81 and is not meaningful ( $P > 0.05$ ), then the covariance matrices assumed. Results of Shapiro-Wilk test of normality for subscales of CPRS showed that S-W ( $df = 1$ ) is between .975 -.99 and is not meaningful ( $P > 0.05$ ), so normality assumed. Of course, the sample size of the groups is equal. The results of Wilks' Lambda test for the investigation of multivariate effects of within group and between group factors, and homogeneity of regression slopes for the factors interaction. Since

the interactional effect is meaningful, the analysis is done based on group separation and interactional factor (within group\*between group). Based on this, three phases of ante-test, post-test and follow-up have been compared and is presented according to group separation rule. Findings from the experimented group showed that  $\eta^2 = 0.96$ ,  $F_{(10, 6)} = 13.35$ ,  $\lambda = 0.04$  which were meaningful ( $P < 0.01$ ). The figures are not meaningful in the control group ( $P > 0.05$ ). Therefore, multiple comparisons of the three phases of pre-test, post-test and follow-up is done for the experimented group.

**Table 2.** Mean and standard deviation of CPRS

| Variables           | Times     | ACT- PRSK program |      | Control |      |
|---------------------|-----------|-------------------|------|---------|------|
|                     |           | Mean              | SD   | Mean    | SD   |
| Conduct             | Pre-test  | 19.40             | 55.5 | 87.41   | 91.4 |
|                     | Post-test | 0.32              | 62.4 | 37.40   | 72.3 |
|                     | Follow-up | 25.31             | 49.4 | 69.40   | 48.3 |
| Social problems     | Pre-test  | 25.16             | 62.2 | 19.16   | 56.1 |
|                     | Post-test | 19.14             | 10.2 | 87.15   | 82.1 |
|                     | Follow-up | 50.13             | 22.2 | 56.15   | 46.1 |
| Psychosomatic       | Pre-test  | 94.17             | 35.3 | 31.17   | 38.3 |
|                     | Post-test | 94.16             | 87.2 | 56.17   | 36.3 |
|                     | Follow-up | 75.16             | 29.2 | 69.16   | 49.2 |
| Shyness-Anxiety     | Pre-test  | 94.16             | 02.3 | 94.16   | 11.2 |
|                     | Post-test | 0.14              | 25.2 | 44.17   | 06.2 |
|                     | Follow-up | 19.14             | 83.1 | 19.18   | 80.1 |
| Behavioral problems | Pre-test  | 00.93             | 02.7 | 06.94   | 17.6 |
|                     | Post-test | 69.78             | 74.8 | 37.93   | 94.5 |
|                     | Follow-up | 44.77             | 03.8 | 25.93   | 12.4 |

**Table 3.** Bonferroni comparisons of the three phases

| Factor                         | Wilks' $\lambda$ | F     | Df1   | Df2   | Sig. | $\eta^2$ | Power |
|--------------------------------|------------------|-------|-------|-------|------|----------|-------|
| Between group                  | .48              | 5.65  | 5.00  | 26.00 | .001 | .52      | .97   |
| Within group                   | .16              | 10.68 | 10.00 | 21.00 | .000 | .84      | 1.00  |
| Between group<br>*within group | .20              | 8.40  | 10.00 | 21.00 | .000 | .80      | 1.00  |

Table 3 shows Bonferroni comparisons of the three phases. In all meaningful dimensions, post-test and follow-up show a meaningful difference from pre-test ( $P < 0.01$ ), but the difference between follow-up and post-test is not meaningful ( $P > 0.05$ ).

## Discussion

The present study was carried out in order to examine the effectiveness of the ACT-PRSK program in decreasing behavioral and emotional problems among preschool children. The results of the present study showed that the ACT-PRSK program had a significant effect on reducing behavioral and emotional problems among preschool children. This finding shows that the experimental parents' children experienced a significant decrease in the subscales of behavioral problems, social problems, and anxiety-shyness problems compared to the control group. In the subscale of psychosomatic problems; however, no significant difference was seen between the two groups. Moreover, with regard to the lasting effects of this program, the results of the follow-up that was carried out 2 months after the posttest proved the lasting effect of

the program. This program was experimentally examined in different societies by various studies, and its effectiveness was confirmed. However, since this program has not been utilized in Iran yet, the present study was an attempt to examine the effectiveness of intervention based on ACT-PRSK program in reducing behavioral and emotional problems among Iranian children. This is because sociocultural differences emerge in different countries in different fields of human behavior and take on various appearances, which affects the effectiveness of therapeutic techniques to some extent [37].

Results show that the children of the parents who participated in the ACT-PRSK program experienced a significant decrease in the subscale of behavioral problems. This finding is in line with a large number of studies that support the effectiveness of the ACT-PRSK program in decreasing behavioral problems among children and the parents' violence against them. Examples of such studies are those carried out by Knox et al. (2010), Kaminski et al. (2008), [33], Knox et al. (2011)[2], Weymouth (2010)[38], Burkhart (2012)[1] and Porter, Howe (2008)[31]. Richardson and Joughin (2002)[39]

reviewed a large number of conducted studies of behavioral problems among children and figured out that parent training programs are the most therapeutic strategy for children under the age of 10 with behavioral problems. Also, in one of the first review studies, Serketich and Dumas (1996)[40] carried out a meta-analysis on 26 controlled studies and concluded that parent training programs were effective in reducing behavioral problems and antisocial behaviors among children at home and school and improved the parents' personal adaptation. The results of the study carried out by Gullotta et al. (2007)[41] also indicated that parent management and training program improved the parents' knowledge, skills, and mental health and led to a decrease in uncontrollable behaviors among children with behavioral problems. The studies conducted by Esmailinasab et al. (2010)[42], Damavandi et al. (2015)[43], Wakimizu, Fujioka, Iejima and Miyamoto (2014)[44], Sanders et al. (2010)[45], and Cassandra et al. (2014)[46] are among other investigations that reported results in line with this finding. Behavioral problems are stable regular behavioral patterns including violation of the fundamental rights of others and violation of the main social norms appropriate to the age of the child or adolescent, are not specific to a certain situation, and are characterized by bad temper and aggression which emerge as cruelty and neglect the rights of others [47]. In justifying this finding, it can be stated that parents of children with behavioral problems have unstable rules, poor problem-solving skills, and weak responsibility while parenting, and their interaction with their children is normally associated with contradictions and is superficially cold and repulsive [48]. Training parents in order to promote their parenting style, utilizing correct training methods, and enhancing the level of the parents' knowledge and awareness of stages of children's development and behavioral and psychological characteristics of children at different stages resolve a large number of the children's behavioral problems which are actually a reflection of wrong behavioral patterns of the parents themselves, and reduce problematic behaviors and violations among children with behavioral and emotional problems.

The results showed that the children of the parents that participated in ACT-PRSK program experienced a significant decrease in the subscale of social problems. This finding shows improvement of social interactions among the children of the parents who received the intervention. Among the studies which are in line with the findings of this study, the studies carried out by Kaminski et al. (2008), Knox et al. (2011), Weymouth et al. (2011), Burkhart (2012), and Knox (2010) who proved the effectiveness of the ACT-PRSK program in improving the interaction between the parents and their children and a decrease in social problems among the children at home and school can be mentioned. Hinshaw et al. (1997)[49] and Kawabata et al. (2012)[50] indicated that improvement in parenting style among parents leads to a decrease in social problems among children. In a similar study, Damavandi et al. (2015) showed that training parents led to a decrease in social problems among

preschool children and an improvement in their relationship with their peers. Regarding this finding, it can be stated that over-controlling the children by their parents can affect the children's development and social adequacy transformation and cause limits to their opportunity of self-regulation development and compatibility skills in dealing with the social environment [50]. It seems natural that parents that utilize appropriate parenting styles along with kindness and warmth in their relationship with their children have children with fewer behavioral problems and higher social qualification [49]. Therefore, research and theoretical evidence shows the important role of the parents and family environment in the appearance of social problems among children, and a decrease in these problems by improving parental relationship with children and modifying intra-family interactions caused by parent training and the conducted intervention can be justified.

Results revealed that the children of the parents that participated in the ACT-PRSK program experienced a significant decrease in the subscale of anxiety-shyness problem. This finding indicates an improvement in emotional and mood problems among the children of the experimental parents after receiving the intervention. Among the studies which are in line with the findings of this study is one which has been conducted by Sohrabi et al (2014) who showed that the parents' parenting ability to manage anxiety and emotional problems can be effective in decreasing the symptoms of anxiety and emotional and mood problems of their children [51]. Moreover, Yarmohammadian et al. (2011) showed that training correct methods of parenting to parents leads to a decrease in behavioral and emotional problems among children [52]. Wakimizu et al. (2014) also emphasized the role of parent-child interaction-based training in decreasing mood and anxiety problems among children [44]. In justifying this finding, it can be stated that parent-child interaction can play an important role in pathology and the treatment of mood and emotional problems among children, particularly when parents are faced with the stressful issue of parenting. The more they are able to manage their mood and anxiety problems, the fewer the mood and emotional problems of their children will be [44]. ACT-PRSK program that focuses on parent-child interaction teaches parents to manage their anxiety and modify their emotions after understanding their children's emotions and mood in the face of emotional and mood problems, which is to a large extent effective in reducing the children's emotional problems such as anxiety and shyness.

Also, results showed that there was no significant difference between the children of the two groups regarding a decrease in psychosomatic problems. This finding indicates that the ACT-PRSK program was not effective in decreasing psychosomatic problems among the experimental children. According to the theory of Callias (1994), the treatment duration is highly effective in the results of the treatment, i.e. the longer the treatment duration, the clearer the results of the treatment will be. Therefore, the shortness of the treatment duration might



have affected this finding [53]. In other words, it can be stated that a large number of behavioral and emotional problems of children can be improved as a result of their interaction with their parents, but some disorders such as psychosomatic problems cannot be improved over a short training duration, and it seems that it is necessary to utilize psychotherapy or drug therapy interventions along with training courses.

## Conclusion

In general, the effectiveness of parent training method in decreasing behavioral and emotional problems depends on the following factors: many behavioral and emotional problems are acquired in the natural environment of the family and the factors that maintain them are also in the same environment; therefore, training those who spend more time with children has the greatest effect and increases the possibility of decreasing inappropriate behaviors and emotions among them. A large number of parents who participated in the experimental group accused themselves of being responsible for their children's problems, or on contrary believed that their children had intentionally selected a way to hurt them. Explaining the nature of the problems could modify the parents' understanding of themselves and their children and decrease the feeling of guilt because of blaming themselves for the children's problems. As a result, a decrease in negative feeling among the parents helped create better and healthier relationships between the parents and their children [54].

Among the limitations of the present study, the parents' unwillingness to participate in the sessions, and sometimes the lack of their cooperation in transferring what they learned to mothers in the family environment can be mentioned, which is recommended to be taken into account in future studies. However, due to the positive effect of the ACT-PRSK program on decreasing behavioral and emotional problems among the children, children specialists are provided with the following recommendations: using ACT-PRSK in medical and counseling centers in order to provide children and families with mental health services, providing preschool and kindergarten teachers with the ACT-PRSK program by the educational authorities in order to better understand the children's emotions and behaviors and to deal with problematic behaviors and emotions more appropriately.

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