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Constructing tailored parental monitoring strategy profiles to predict adolescent disclosure and risk involvement

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For more than two decades, parental monitoring has been negatively associated with adolescent risk behavior (de Winter et al., 2016; DiClemente et al., 2001; Li et al., 2000).Specifically, the likelihood that adolescents would engage in risky behaviors declined as parents could identify their adolescents' location, peers, and activities. Although researchers continued to collect evidence supporting parental monitoring as a protective factor, the conceptual definition of monitoring changed with Kerr and Stattin's quintessential piece that separated *how much information had been gathered* by parents from *the approach used to obtain that information* and source of the information(Kerr and Stattin, 2000; Soenens et al., 2006; Crouter and Head, 2002).

Various parental monitoring strategies have been identified from previous work (Solís et al., 2015; Criss et al., 2013; Huebner and Howell, 2003). Not all monitoring strategies offer positive effects on adolescent outcomes or for the parent-adolescent relationship. Parents may use of rule-based monitoring by implementing rules intended to restrict adolescents' activities, peers, and plans (Dittus et al., 2013; Tilton-Weaver et al., 2013; Tornay et al., 2013). Parents may also utilize other adults or adolescents from the surrounding neighborhood to gather information about their adolescents' whereabouts and activities (Ceballo et al., 2012; Smetana and Daddis, 2002; Barber, 1996). These strategies, also characterized as behavioral control strategies, can be associated with increased adolescent risk in many situations as opposed to open discussions between parents and adolescents based on trust. This, and other work in this area, highlights the mutual contribution of both the parent and adolescent to parental monitoring processes and outcomes.

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Our own work has identified three general types of monitoring strategies used by parents in rural Appalachia. These strategies include a direct strategy in which the parent directly solicits information from the adolescent, an indirect strategy in which the parent utilizes the adolescents' friends, other parents, and other individuals in the proximal environment, and finally, a restrictive strategy in which the parent uses privacy invasion means to obtain the information such as reading an adolescent's journal or listening to conversations (Metzger et al., 2012; Cottrell et al., 2007). Our initial findings demonstrated that the direct strategy (and in some cases the indirect strategy) was most successful in preventing adolescent risk behavior and that the restrictive strategy was predictive of increased adolescent risk involvement.

The purpose of the present study was to identify monitoring strategies parents use to obtain information about their adolescents and explore how the separate strategies may be used independently, or in combination with, one another. This tailored approach would be used to outline protective parental monitoring profiles that could be useful for increasing adolescent self-disclosure of activities and preventing adolescent risk. Researchers and providers could use this approach to tailor recommendations to parents and adolescents designed to strengthen the parent-adolescent relationship and prevent risk behavior.

1. Methods

1.1. Sample characteristics and recruitment

Five hundred nineteen adolescent-parent dyads (39% of eligible students) participated in this study. Adolescent self-report of risk involvement and disclosure was compared to parent report of monitoring strategies used. Adolescents enrolled in this study were between 12 and 17 years of age (X = 15 years). The majority of the sample (68.5%) were female and lived with a biological parent/guardian (91.1%). Similar to the ethnic characteristics of the recruitment area, 93.8% of the participants were Caucasian. Parents who completed the study with their adolescents had a mean age of 37 years. Slightly <20% of the sample (18.4%) reported household incomes less than \$15,000.

Early approval from middle and high school administrators throughout West Virginia was obtained prior to going into the schools via an assembly format to discuss the purpose and design of this study. Eligible adolescents (any adolescent who was 12 to 17 years old) were given a packet (cover letter, consent and assent forms, and FAQ study description). Adolescents were encouraged to discuss the study with their parents prior to returning completed forms if they and one parent who was willing to participate. If an adolescent had two legal guardians who shared caregiving responsibilities in the same household equally, the adolescent was asked to choose only one parent who would be willing to participate in the study.

Upon consent, adolescent-parent dyad contact information was collected. All participants were then mailed the study surveys, two return postage-paid envelopes, and a reimbursement form for \$25 once received. Any questionnaires received without the seal or a broken seal were not included in the study (n = 2). Adolescents additionally could report directly to the study team if they felt their responses had been reviewed by a parent or other adult without their consent. This study was approved by the West Virginia University Institutional Review Board.

1.2. Measures

Parent monitoring strategies. For each item, parents reported how often they engaged in different behaviors in the past four months. Responses were recorded on a 4-point rating scale (0 to 5 + times). Three items assessed *direct solicitation*, or how often parents directly asked their child for information about their activities or whereabouts

(e.g., "How many times have you talked to child about what he/she had planned?", $\alpha = 0.81$ for direct solicitation subscale). Seven items measured parents' use of *indirect monitoring* strategies involving relying on other individuals for information (e.g., "In the past 4 months, how many times have you talked to other parents about your child's activities and whereabouts?", $\alpha = 0.86$ for indirect monitoring strategies). Finally, three items assessed parents' engagement in *restrictive monitoring* behaviors such as looking through their adolescents' personal belongings (e.g., "In the past 4 months, how many times have you listened to your child's phone conversations without telling him/her?", $\alpha = 0.72$ for restrictive monitoring subscale). An average for each group was used in this study¹⁷.

Parental monitoring knowledge was measured using a modified version of Silverberg's Parental Monitoring Knowledge Scale (Silverberg and Small, 1991). Parents' reported how often, on an average day, parents knew with whom their adolescents spent time, where they were, and what they were doing at different times throughout the day (e.g., afternoons, evenings, weekends). For each item, participants could choose "never" (de Winter et al., 2016), "a few times" (DiClemente et al., 2001), "several times" (Li et al., 2000), or "all the time" (Kerr and Stattin, 2000). An average was calculated for this scale. The Cronbach's alpha reliability for this composite scale was 0.95.

Adolescent disclosure was examined using an averaged 3-item composite variable (Smetana et al., 2006). Adolescents responded to the following items, "I tell my parent what I am doing before he/she has to ask," "I tell my parent who I am going to be with before he/she has to ask," and "I talk to my parent about plans with friends before he/she has to ask" based on a 4-point rating scale where 1 represented "strongly disagree" and 4 represented "strong agree". Adolescents chose the response that best represented their self-disclosure to their parents on an average basis. The Cronbach's alpha reliability for this disclosure composite score was 0.75. An average was calculated for this scale.

Adolescent risk involvement was assessed by asking adolescents how frequently they engaged in a range of potentially risky or risky behaviors in the past four months²⁰. Response options for all but the sexual risk items ranged from "0 times" (de Winter et al., 2016) to "5 or more times" (Kerr and Stattin, 2000). Adolescent involvement across 10 areas were included: alcohol, tobacco, marijuana and other drugs, skipped school, any suspensions from school, vandalizing behaviors, and other behaviors including staying out past curfew and working with friends to get around their parents' rules were assessed in this study. Adolescent sexual intercourse with and without condoms as well as adolescent engagement in other sexual behaviors while still a virgin was also assessed but as dichotomized variables (yes/no) rather than in terms of frequency. Three subscales were developed using the collected items: adolescent delinguent activity (skipped school, suspensions from school, vandalizing), adolescent substance use (alcohol, tobacco, marijuana and other drugs), and adolescent problem behavior (staying out past curfew, working with friends to get around the rules, and engaging in sexual intercourse). In order to calculate a total for each subscale, all of the rating scale responses were recoded into 0 times = "no" and ≥ 1 = "yes". Once recoded, all items were summed and used to create the specific subscale scores.

1.3. Statistical analyses

Descriptive statistics for each study variable and for each of the established parental monitoring strategies were calculated for the present sample. The established strategies were submitted to cluster analysis to establish profiles where multiple combinations of parental monitoring strategies were used. First, Ward's hierarchical agglomerative cluster analysis was run to aid in the determination of the number of clusters in the dataset. This technique provides numerous stopping rules including graphical displays of solutions (dendograms) and is recommended for determining the number of clusters present in a data set (Henry et al., 2005; Lorr, 1994). Next, a nonhierarchical, *K*-means

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