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A systematic review of community-based parenting interventions for adolescents with challenging behaviours

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ARTICLE INFO

ABSTRACT

Parenting skills training is an established means of treating challenging behaviours among young children, but there has been limited research on its efficacy when used to treat challenging adolescent behaviour. The aim of this systematic review was to evaluate the efficacy and effectiveness of community-based parenting interventions designed for families with adolescents, as judged in terms of increased knowledge and skills among parents, improvements in adolescent behaviour, and program feasibility within community settings. Results indicated that intervention group parents typically made greater gains than did control group parents on measures of good parenting, with positive flow-on effects to some aspects of challenging adolescent behaviours. Limited evidence suggests that group and individual intervention formats may be equally effective and that there is no advantage to the participation of the target adolescent in the intervention.

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Introduction

Over the past four decades, parenting interventions derived from behaviour modification techniques have been successfully implemented in a number of community and clinical contexts. For the most part, these have targeted the prevention or treatment of challenging behaviours in pre-school or early primary school aged children (Dretzke et al., 2005; Shaffer, Kotchick, Dorsey, & Forehand, 2001; Shelleby & Shaw, 2014; Stevens, 2014; Tully & Hunt, 2016). More recently, similar programs have been developed for parents of adolescents. As would be expected from a developmental perspective generally, these programs have an increased emphasis upon family relationships and communication, together with consistent boundary setting and non-harsh disciplining. Adolescent parenting programs fall into two main categories; namely, *preventive* population health approaches (Chu, Bullen, Farruggia, Dittman, & Sanders, 2015; Chu, Farruggia, Sanders, & Ralph, 2012), and interventions designed for the *treatment* of specific adolescent behaviours around emerging autonomy and other developmental drivers. The present review focuses upon the latter style of parenting intervention.

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Adolescent behaviours of concern range from fairly minor acts of defiance such as breaking family rules, verbal aggression and occasional truancy to more serious behaviours such as physical assault and theft, which may bring the young person into contact with the justice system (Dickson, Emerson, & Hatton, 2005; Smart, Vassallo, Sanson, & Dussuyer, 2004). Emotional and behavioural disorders occur in approximately every sixth to tenth adolescent surveyed in large community and global surveys (Barkmann & Schulte-Markwort, 2012; Wang, Liu, & Wang, 2014; World Health Organization, 2001), with a higher prevalence of internalising behaviours among females (Bask, 2015), but greater prevalence of challenging behaviours among males overall (Thijs, van Dijk, Stoof, & Notten, 2015). Just under 5% of adolescents have been found to fall into a 'severely antisocial' sub-group, as characterised by intensive internalising and externalising behaviours (Vaughn, Salas-Wright, DeLisi, & Maynard, 2014). Prevalence rates for a variety of self-reported antisocial acts among British adolescents aged 11–15 years range from 0.1% for forced sexual acts, through 11.9% for truancy to 20.2% for starting fights (Dickson et al., 2005).

The distinction has been made between challenging behaviours that were present in childhood and persist into adolescence and emerging adulthood versus those behaviours that arise in early-mid adolescence but that reduce over time (Moffitt, Caspi, Dickson, Silva, & Stanton, 1996). The latter may reflect some of the behaviours that can appear as adolescents develop greater autonomy, place increasing emphasis on peer relationships and explore emerging adult identities. This is a stage of development in which biological maturation outpaces psycho-social maturation, and low-level oppositional behaviour is considered normative in otherwise healthy adolescents (Moffitt, Caspi, Harrington, & Milne, 2002). Nonetheless, these transient behaviours may give rise to concern and family conflict, and result in parents seeking education and training in skills that can be used to promote desirable adolescent behaviour while maintaining positive family relationships (Kane, Wood, & Barlow, 2007; Ralph et al., 2003).

While parents may be the best-placed and most highly motivated means of influencing adolescents' behaviour, they are also highly likely to be dealing with other family and personal life issues and may require to be taught different and additional skills to those that were previously effective for parenting during the childhood years (Stallman & Ralph, 2007). For example, negotiation and a partnership approach to parenting becomes more important as children enter into adolescence and begin to take greater responsibility for their actions (D'Angelo & Omar, 2003). Parents and adolescents can also have conflicting expectations about parenting and appropriate discipline and respect, particularly when family dynamics are complicated by migration and differing cultural values between generations (Perez-Brena, Updegraff, & Umana-Taylor, 2015).

In order to gain greater understanding of the impact of community-based parenting interventions that have been developed to assist parents of adolescents with challenging behaviours, we undertook a systematic literature review of the international research. The primary aim of this review was to evaluate the *efficacy* ("can it work under ideal conditions?") and *effectiveness* ("does it work in the real world?") of parenting programs designed for the treatment of challenging adolescent behaviours (Streiner, 2014). The second aim of the review was to examine the impact of individual study design characteristics such as delivery format and target audience upon the implementation and effectiveness of these interventions.

Methods

Inclusion criteria

Eligible studies used a randomised, controlled design within a community setting. In any one study, at least half of the participating parents were required to have an adolescent within the target age group of 10–18 years, and the mean age of the adolescents in each study was also required to fall within this range. Because the focus of the review was on community-based parenting interventions for the treatment of challenging behaviour (as opposed to its prevention), only studies that provided pre-test, baseline measures of adolescent clinical or sub-clinical (upper end of normal) behavioural challenges and/or heightened parental concern, were eligible for inclusion. The range of eligible behaviours under consideration was deliberately left broad to allow for the review of a variety of community-based parenting interventions aimed at teaching new skills for addressing common areas of concern such as risk-taking, aggression and conduct-related problems. No limitations were placed upon the theoretical background, design or delivery of the parenting interventions, save that interventions were structured, repeatable and deliverable within a community context.

Exclusion criteria

Studies were excluded if these were judged to have a primary prevention focus (i.e., the adolescents were not yet exhibiting challenging behaviours), if challenging behaviours were secondary to underlying developmental or physical conditions, or if the behaviours were too extreme for intervention in community-based settings (e.g. attempted suicides, chronic delinquency and serious emotional disturbance). School-based interventions requiring significant teacher or curriculum input were also excluded on the grounds that these were not necessarily deliverable in a wider community context, as were interventions that required input from medical or juvenile justice institutions.

Literature search strategy

The search strategy was designed to capture randomised controlled studies of parenting interventions for adolescents exhibiting challenging behaviours. Search terms were truncated (as indicated below by '*') and combined with Boolean