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## Introductory Chapter: Parenting – Empirical Advances and Intervention Resources

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Additional information is available at the end of the chapter

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Raising offspring is a hard and long work for humans: parents take care of their children for many years, and in some of the so-called western cultures, their involvement still continues for several years after their sons have gained a partial socioeconomic autonomy. Child rearing is also a very demanding task: few skills are not acquired by parents and are intuitive, as protection, emotional sensitivity, or baby talk [1], but many other abilities must be learned. Therefore, parenting is a field of human experience with a privileged kind: it is a hinge between nature and culture. On the one hand, parents must support natural growth of their children, guaranteeing balanced nutrients, warmth, and safety; on the other hand, parents are their children's first socialization agents. They have to enculturate their children to the values, beliefs, knowledge, customs, and habits of the specific society in which they live (see [2]).

Every day a parent engages in the enculturation task simply interacting with his/her child: caressing, hugging, feeding, washing, playing, talking, teaching, reproofing, encouraging, and so on, are all socialization practices and ways that allow the child to participate in the adults' life as an apprentice in the shop craft. Just by means of a *guided participation* [3], the child is initiated to cognitive and social skills allowing to read reality and give meaning to events. A guided participation implies at least a dyadic relationship: a caregiver (a parent) and a cared (his/her child), or a tutor and a tutee. However, for a long time psychologists and researchers focused their attention only on one person inside the dyad and considered the parent (especially the mother) as *the* primary source of child's developmental outcomes. They viewed parenting as a unidirectional relationship in which parents are active modification agents of children's abilities and behaviors, and on the contrary, children are passive subjects so that their cognitive and behavioral qualities may be disciplined and shaped by parents. What kind of parenting should ensure successful, adapted, and prosocial sons and daughters? This has been the question for many decades [4, 5]. Thus, "many psychologists expected to find

a relation between what parents did and particular child outcomes and failed to appreciate that the child is always interpreting the actions of parents" ([6], p. xvii), and he/she actively contributes to the quality of the specific parenting relationship.

Instead, on the last two decades of twentieth century, a transactional [7] and ecological [8] point of view has been affirmed. Parenting has not been considered anymore only a causal factor of child's development, but primarily it is believed a *product* of the daily child-parent relationship and other systemic factors [9, 10]. Moreover, if parenting is a consequence, does it no longer affect child outcomes? According to Kagan [6], there are at least three ways by which parenting is a source of influence: (1) the *educational practices* (as when a parent reinforces desirable behaviors and punishes undesirable ones); (2) the *identification* (as when a young child reproduces the same parent's emotional response to a neutral event); and (3) the *knowledge* of family story and traditions (as when a child is proud of a talented relative and, therefore, he/she is confident about his/her own abilities and a successful future for himself/herself).

## 1. Parenting in children's and adolescents' adjustment

This book presents some aspects of this double nature (as both causal factor and consequence) of parenting. In Section 1, three original papers address the existing interdependence between the two poles of the parent-child relationship. Georgiou and Symeou (Chapter 1) describe some key constructs of parenting (i.e., parental involvement and control, locus of control and values, parent-adolescent conflict) and their connections with adolescents' psychological adjustment. Parenting as behavioral consequence ("what the parent does") includes direct actions toward the child (educational practices), as punitiveness or warmth. However, since Baumrind's theorization, the influences of parenting on children adjustment have been better described as "complex pattern of attributes" or parental styles [4] rather than discrete parental practices applied to children. Parenting is a complex construct and includes a typical climate in which the interactions with the child occur (parenting style), and beliefs about the nature of the child, the characteristics of child's development and education, and the role itself of the parent as a parent (attributions, self-efficacy, self-esteem, and so on). These last ones are cognitive-motivational factors that have the power of modulating interactions and their emotional tone. When a parent slaps a young child, it could occur also because he/she believes that a corporal punishment is the right way to correct child's bad behavior. The parent also develops personal expectancies and self-confidence regarding his/her role, daily parental responsibility, or the management of child's behavioral problems. These personal beliefs about personal competence or effectiveness (self-efficacy) are another key construct in parenting researches moving from the sociocognitive perspective [11]. Benedetto and Ingrassia (Chapter 2) discuss the quality of parenting and children care as a function of parental self-efficacy beliefs.

Parenting depends on many individual, relational, social, and cultural determinants. Adult's characteristics alone (as personality or psychopathologies) cannot explain child rearing quality. Parent-child influences are mutual, and also child's factors (gender, temperament, etc.) have to be considered. A newborn is a "socially competent" partner into dyadic relationship [12].

On the contrary, a “difficult” child, who is inconsolable or very irregular in falling asleep, can put a strain on parents’ caring skills. Silva and Sandström (Chapter 3) deal with individual characteristics and particularly child’s temperament, neurobiological vulnerability, and early behavioral problems that influence parental behaviors and emotions. From this bidirectional perspective, parenting is conceived as a transactional process in which specific combinations of negative parents and child characteristics are in reciprocal interaction. Along the development, coercive cycles are risk factors for offspring’s adjustment problems depending on both children’s natural characteristics and nurtured (scarce) parental competence.

Among parental factors, studies now focus more on paternal role following research advances that integrate gender differences into traditional socialization theories [13, 14]. Some aspects of child rearing are similar for mothers and fathers, but also some differences emerge. For example, regarding child’s emotional adjustment, common effects emerge for maternal and paternal overinvolvements that result associated with children anxiety [15]. The influence of father in early adjustment difficulties (i.e., child’s social anxiety) was recently emphasized by some authors [16]. Dissimilarity in parenting styles within the couple can work as risk factor for the development of child’s psychological problems [17]. However, the presence of both parents can balance ineffective parenting (i.e., authoritarian or permissive style) because an authoritative style shown by at least a parent is linked to a better adjustment in adolescence [18]. Finally, factors such as family support, parents’ social network, and familial values and traditions help us to comprehend how dimensions and quality of parenting work in daily children’s care.

Even assuming different theoretical approaches for describing family influences on child’s socialization (i.e., parenting styles, practices, or sociocognitive components as self-efficacy), parenting *is not the unique* causal source that affects children’s developmental outcomes. According to the ecological theory [8] and the developmental psychopathology perspective [7], researchers recognize that environmental influences are complex including individual, parental, and extra-family factors (i.e., peers or child-teacher relationships). All these factors, together with child’s variables (genetic, temperamental factors, etc.), work as *multiple* sources of influence for child’s social and emotional development. From this perspective derives the assumption that when a child displays behavioral or emotional problems, parents did not “cause” them, but these atypical behaviors have a complex etiology. Secondly, due to transactional effects during parent-child exchanges, parenting factors affect child’s adaptive or maladaptive behavior, but child’s response in turn influences parental behaviors and adjustment (i.e., discipline practices, affection and stress, marital conflicts, etc.). Thirdly, parents can become an important help for practitioners working with “difficult” children, so their involvement is essential in interventions [19].

## 2. Parenting-based interventions

In Section 2, two original papers illustrate parental challenges and promising interventions for children and adolescents with internalizing or externalizing problems. These interventions not only solve children’s disorders by improving parental skills but also prevent the

development and worsening of child's emotional and behavioral problems by building constructive and positive parent-child relationships.

In their chapter, Scaini and collaborators (Chapter 4) discuss how parenting is influential for etiology, maintenance, and treatment of childhood internalizing problems. Psychological problems as anxiety and depression are difficult to study in childhood, but empirical data are increasing. Advances in assessment and research methods (e.g., observational data and ecological parent-child interactional tasks; [16]) made it possible to conduct studies with very young children. These studies have focused the dimensions of parenting that are crucial both in relation to particular phases of child's development (overprotection, low warmth or overcontrol) and specific internalizing problems (worry, negative mood, excessive fears, etc.). Since parental behaviors are quite modifiable, these findings can be transferred into interventions, suggesting which supportive parental behaviors (i.e., age-appropriate granting of autonomy) must be increased or how to change parenting or family environment (i.e., reducing overcontrol, marital conflicts, etc.) to reduce risk for vulnerable children [20].

However, children's internalizing problems are not initially caused by parenting practices, because several individual and situational factors intervene along child's development, first of all child's characteristics interacting with negative parental or environmental stressors. This means that a different trajectory can develop when child's genetic predisposition interacts with a favorable environment (i.e., supportive parenting, family harmony) that functions as protective factor decreasing the expression of disturbances. Second, since child's emotional or social difficulties influence parenting, defining a clear directionality of influence from child to parents or vice versa is complex. For example, an anxious child often activates the parental intrusive interventions (e.g., unnecessary helps in tasks), but these parental behaviors may paradoxically reinforce in the child the perception of threat and intensify his/her worry and distress.

Among child's characteristics, recent studies evidence how cognitive and metacognitive processes (dysfunctional thinking styles, worry, cognitive monitoring; [21]) can mediate the associations between child's adjustment and parenting influences. In fact, cognitive and metacognitive processes not only increase children's vulnerability to emotional disorders, but in some studies also resulted a stronger predictor of psychological problems (like as adolescent's anxiety) than parenting behaviors [22]. All these findings are interesting, but more research effort is needed because the directionality of influences is difficult to establish. Further longitudinal studies can explore the reciprocal parent-child interchanges along time, and also which factors are influential (child's behaviors on parenting, or parenting on child's behaviors) in specific developmental phases (e.g., infancy vs. adolescence).

Recognizing family influence in the expression of children's problems contributed to the inclusion of parents in treatment. Family interventions are often behavioral parent trainings (BPTs), an empirically based treatment approach based on cognitive-behavioral principles [23, 24]. BPT is a complementary component of child's treatment and generally aims to modify parental communication, behaviors, or emotions that maintain or exacerbate child's internalizing symptoms [25]. Other directions for intervention came from innovative cognitive approach that suggests to intervene both to parental behaviors (i.e., reducing overcontrol) and negative coping or cognitions (i.e., rumination) that increase the risk of developing internalizing symptoms [21].



Finally, Muratori, Levantini, and Lambruschi (Chapter 5) discuss BPTs for conduct-disordered children. In this field, preventive family programs are a crucial intervention strategy, because early signs of behavioral problems in infancy are often predictive of persistent antisocial problems in adolescence [26]. These BPTs are generally group-based programs that teach parents how to manage common disruptive child's behaviors (as negativism, impulsivity, or deregulated emotionality) in day-to-day situations. Since group programs encourage parents to share both problems and solutions, they enhance parental communication and problem-solving skills, increasing self-efficacy and motivation for change. Most BPT programs are designed for preventing conduct problems, and they start in infancy or early childhood, such as the *Incredible Years* Programs developed by Webster-Stratton and her colleagues [27]. Second, since children's disruptive problems often extend from family to peer relationships, several programs add other components that could be implemented with the teachers and the children themselves (both alone or combined). School-based programs resulted efficacious to improve self-regulation and social skills [28]. However, multimodal interventions are necessary when BPT alone is not sufficient with children presenting severe disruptive behaviors or comorbid internalizing problems [29]. This multimodal approach is well represented by the *Coping Power Program* by Lochman and colleagues [30] in which, in parallel with the BPT component, children receive a direct cognitive-behavioral training on anger management, social problem-solving, or interpersonal skills. Third, BPT interventions are graduated according to the severity of children's problems (i.e., co-occurring ADHD or developmental disabilities), or the presence of family factors (socioeconomic disadvantage, marital conflict and divorce, etc.) that work like an additional distressing source for parents. The *Triple P* [31] intervention program provides parents with different levels of support (i.e., from brief telephone assistance to BPT) that are intensified according to the complexity of children's needs and/or family's problems.

Therefore, promising parenting interventions assume an ecological and complex perspective in promoting the quality of family life and supporting parents of "difficult" children and adolescents. The current BPT approach does not reduce intervention to a "corrective" strategy for changing parents' ineffective practices (i.e., reinforcing misbehavior by parental attention, reacting coercively with angry and punishment) or teaching them alternative discipline techniques (i.e., use of praise, effective instructions, etc.). Studies confirm that changes in parental skills reduce the severity of child's behavioral problems and have also a consistent impact on parental stress and perception of incompetence [24]. Advances in BPT now incorporate theoretical constructs from a sociocognitive perspective: they assume that parental factors as beliefs and attributions, coping skills, sense of competence, or marital quality [11, 32] impact parenting behaviors. In turn, intervening on parental beliefs, emotional needs, and self-confidence increases short-term parental well-being and it also lays the basis for positive changes in parent-child interactions and family environment [33].

Psychological interventions for children and adolescents can benefit from these advances in studying parenting and child development. This book offers an overview of these recent research fields, with the primary intention of linking the empirical findings to the needs of parents and children. Suggestions that can be drawn by researches and practitioners are several [19]: to consider all multiple influences and reciprocal interchange between children and their parents' behaviors; to have a clear theoretical model to explain and measure parenting-related constructs; to use more assessment methods (i.e., observational data, both child-report and

parent-report ratings) with the aim to represent several aspects of parenting and perceived family life; to adopt longitudinal design research; and finally, to find well-established strategies for intervening with parenting, selecting among evidenced-based programs.

Treatments involving parents and prevention programs are complementary interventions, and both can be seen as a strategy directed to reducing the long-term troubles and suffering in children and parents [19]. Interventions help parents of emotionally or behaviorally difficult children to manage them, whereas prevention enhances parental self-confidence and skills optimizing child-rearing. Prevention generally has low cost compared to its advantages, particularly the group programs and the early interventions (i.e., supporting the transition to parenthood) or programs delivered when children are younger. But preventive effects can be evaluated only by studying parent-child interactions and measuring their changes over time. Applied research in prevention is particularly difficult to realize: empirical data often are scarce or lack of longitudinal and follow-up measures (for both intervention and control conditions). As some authors remind us, while developmental research now offers complex and transactional models explaining family influences on childhood disturbances, “the child and parent clinical intervention literature lags behind with regard to these methodological advances” ([34], p. 3). More rigorous studies can be also useful for selecting programs that are targeted for children’s and family’s needs or identify which parents are not eligible for parent training. In fact, in some circumstances (i.e., parental psychopathology, poverty, maltreatment, or family violence) parental involvement in interventions is problematic and unsuitable [35]. The wish is this effort in applied research can improve the effectiveness of intervention strategies that educational and health services offer to families and children.

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