Effects of communication skills training upon the perceived communication satisfaction and conflict behavior of family systems

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EFFECTS OF COMMUNICATION SKILLS TRAINING UPON
THE PERCEIVED COMMUNICATION SATISFACTION AND
CONFLICT BEHAVIOR OF FAMILY SYSTEMS

by

Julie Birky-James

B. A., University of Montana, 1985

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Interpersonal Communication

Effects of Communication Skills Training Upon the Perceived Communication Satisfaction and Conflict Behavior of Family Systems (140 pp.)

Director: Betsy Wackernagel Bach

The purpose of this research was to study the effect of communication skills training upon families with an adolescent whose behavior has caused youth court involvement. The area of interest was family communication and the research question was: "Does communication skills training positively effect the communication satisfaction, conflict behavior and the cohesion/adaptability variable of family systems?"

Families were recruited by youth court probation officers, and those who volunteered became subjects. There were twenty-four subjects, twelve in the treatment group and twelve in the control group. Mean age of treatment parents and youth was 37 and 14, respectively; of control parents and youth, 38 and 15, respectively.

The experimental method randomly assigned families to one of two groups. Treatment families received eight communication skills training sessions and met with their probation officer. Control families did not receive training, but also met with their probation officers to control for attention. Pre- and Post-treatment measures were designed to assess family cohesion and adaptability, communication satisfaction and conflict style behavior.

Three hypotheses were posited. The first was partially supported as treatment families showed a significant \( p < .05 \) change in cohesion. There was an unexpected significant \( p < .05 \) change in adaptability for control families. Communication satisfaction showed a significant \( p = .05 \) increase, and the second hypothesis was supported. Finally, the third hypothesis was only supported in part. A significant \( p < .01 \) increase in the use of the solution orientation conflict style was shown, without a corresponding significant decrease in the use of nonconfrontation or control.

This research appeared to support some areas of the theory that communication training effects family communication and conflict behavior. Limitations, implications and direction for future research were also discussed.
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CHAPTER I

INTRODUCTION

Purpose of Study

The purpose of this research is to study the effect of communication skills training upon parents and youth. The focus will be upon families, specifically those families where an adolescent's behavior has caused youth court to become involved. Families participating in this study have been referred by the Missoula Youth Court. The area of interest is family communication and the research question for this study is: "Does communication skills training positively effect the communication satisfaction, conflict behavior and the cohesion/adaptability variable of family systems?"

More specifically, this study will look at how satisfied families are with their current communication and behavior during conflict, and what outcomes communication skills training may bring about. Programs involving the family in communication training have been highly successful in reducing recidivism rates (Alexander & Parsons, 1973; Emshoff & Blakely, 1983; Kifer, Lewis, Green & Phillips, 1
1974), and further research into this promising area has important implications for adolescents and their involvement with youth courts (Alexander & Parson, 1973; Emshoff & Blakely, 1983).

Review of the Literature

The following literature review covers the history of youths' involvement with court, youth court programs, parent training programs and the use of parent training programs in youth court. While this may appear to be a wide variety of topics, they are related by their effect upon one another.

Youth court was created out of the awareness of the difference between adolescents and adults that early parent education movements created (Schlossman, 1976). The first youth court programs appeared to enjoy success measured by recidivism rates, but did not address the family as a system or its effects upon the behavior of adolescents (Patterson & Stouthamer-Loeber, 1984). With renewed interest in parent education in the 1960's, a number of parent training programs were created and reported as successful (White, 1975).

In response to these programs, youth courts began using parent training and education as a program to divert adoles-
cents from other court action (Merry & Rocheleau, 1985). These diverse areas are interrelated and provide background and history for the current study.

Overview of Youth Court

Today youth displaying behaviors such as running away, truancy or "incorrigibility" (e.g., acting against the wishes of the parents or acting out of control), are labeled "status offenders." When youth commit illegal actions, such as theft or use of alcohol or drugs, they are labeled "juvenile delinquents." Each is a separate classification, or level of behavior, and in both cases they are treated separately from, and differently than, adults (Ketcham, 1979).

Historically, there were no distinctions between different behaviors of misconduct by youth. Youth who exhibited behavior which today would fall into the status offender category, were perceived as being on the path to adult criminality (Merry & Rocheleau, 1985). They received the same criminal treatment which adult offenders received.

It was only eighty years ago that Illinois established the first juvenile court and juvenile criminals were defined differently from adult criminals (Ketcham, 1979). This
provided the first legal distinction between youth and adult offenders. However, incorrigible acts were often still treated in the same way as crimes. Status offenders were placed in the same detention centers and institutions as juvenile delinquents (Merry & Rocheleau, 1985).

In 1974 the Federal Juvenile Justice Delinquency Prevention Act was passed. This provided for the separation of status offenders from juvenile delinquents, and prohibited institutionalization of youth for behavior that would not be a crime if committed by an adult. Merry (1985) interpreted this as marking the first visible signs that the legal system was beginning to catch up with the sociologists and psychologists whose research showed status offender behavior to be rooted in disrupted families and communities, rather than criminal intent. In fact, "more proof exists that truancy, stubbornness, or running away from home is a transient behavior likely to disappear in time" (Merry & Rocheleau, 1985, p. 22).

Overview of Youth Court Programs

Before the distinction between juvenile delinquent and status offender occurred, there were very few options for
children referred to youth court. Often the only choices were either probation (a period of time during which the youth must stay out of trouble, report in to an officer on a regular basis, and may or may not include other requirements) or some form of institutionalization (placement in a juvenile detention facility, jail, prison, or in some cases, mental facilities). Since the distinctions between juvenile delinquent and status offender became legal, a variety of programs have been created as alternatives to probation, sentencing and institutionalization.

Probation is still used although it is often not as effective as alternative programs in reducing recidivism rates (Cunningham, 1985). The term probation is still associated with criminal court and carries a criminal connotation. Institutionalization also does not appear very effective in reducing recidivism rates, and so there is an increasing interest in alternatives (Bird, Beville, Carlson, & Johnson, 1978). The alternative programs are called diversion programs. These programs are intended to divert youth away from legal court action, and take many different forms. The goals of a diversion program are to prevent legal court action, and also to prevent future behavior which would
result in the adolescent coming before the court again. Different diversion programs are outlined below.

Some diversion programs are similar to, or function with, the court system (Blagg, 1985; Rothstein, 1985; Vaughn, 1985), some are classes that youth attend while still living at home and going to school (Regoli, et al., 1985; Emshoff, et al., 1983), while others require the youth to live at the facility for a period of time ranging from months to a year (Clifford, 1985). In all diversion programs adolescents are referred by youth court. The following programs described are a) representative of the variety and scope of diversion programs currently available, b) show how differently they may work, c) show whether or not the results have been researched and, d) with what results.

The Holloman Air Force Base Program. The Holloman Air Force Base (AFB) program is designed to fit the specific situation of families living within a military installation and functions similarly to the court system. Offenders are brought before a Juvenile Corrections Board which is staffed by a diverse array of people: the base chaplain, a representative from the base hospital’s mental health clinic, a security policeman, and the senior enlisted advisor or
designated representative (Vaughn, 1985).

An honest attempt is made to hear the teen's side of the situation; they are given a chance to speak on their own behalf before the board. Their testimony and the overall family situation is taken into account, rather than just the factual information presented regarding the offense. This hearing is followed with the usual list of youth court type punishments: reprimands, referral to counseling, placing base areas and/or facilities off limits, imposing curfews, or referral to state or federal probation system. While this program usually keeps the base youth out of the local youth court system, in many ways the youth perceive it as being little different from the local court (Vaughan, 1985).

**Odessa, Texas, Teen Court.** The second program which is similar to the court system is the Odessa, Texas, Teen Court (Rothstein, 1985). It is called Teen Court for obvious reasons - the lawyers, bailiffs, clerks, and jurors are all teens. The only adult is an unpaid volunteer who acts as judge. Successful results are based upon the fact that few youth who become involved in teen court are ever repeat offenders (Rothstein, 1985). Sentences from the court always take two forms: community service and jury service.
Community service may involve working at an animal shelter, library, or nursing home. Teens may pick up trash in a ball field, work for the park or police department, or other community agencies. The agencies involved are positive about the program since they obtain free, conscientious labor at a time when budget cutbacks are high. The recipients of the teen's work are also very positive as many of the teens return to the agencies as volunteers after their "sentence" is done (Rothstein, 1985).

When jury service is required by the Odessa Teen Court, the teen serves for the length of time assigned. Many of the youth who appear before the teen court become interested in the legal system. Often they return after their trials and want to continue taking part by staying on the jury or being one of the other teen participants. Between 100-150 teens have stayed with the program on a long-term basis (Rothstein, 1985). About half of the jury is made up of prior offenders. While this program is viewed as innovative, and successful in keeping youth from being repeat offenders, it still uses the criminal court system as its model (Rothstein, 1985).

Reparation Program of England. The final program
representative of diversion alternatives which are similar to, or work with, the court system is the reparation program in England (Blagg, 1985). The term reparation was specifically chosen because it best described the intent of the program. If theft was involved compensation could take the form of returning the original item, or money equivalent to the replacement cost. If assault, vandalism, or some other offense was involved, reparation could take the form of an apology to the victim, repairing the damage, doing chores for the victim or other volunteer work in the community (Blagg, 1985).

Blagg (1985) reports reparation appears to be working well. Offenders who have committed vandalism or theft, thus being classified as juvenile delinquents, are given the choice of making reparation, over usual sentencing alternatives. England already has an established practice of assessing and treating delinquent behavior by criteria other than the purely legal (Landau & Nathan, 1983; Harris, 1985).

When reparation is done in the appropriate climate, with willingness of both the offender and the victim results are often satisfactory, although some difficulties may remain. Each case must be assessed individually, and repara-
tion will not work in all cases. However, when it is appropriate and offenders meet directly with their victims and then make reparation directly by returning the item stolen, repaying for the item, or repairing the results of vandalism, or indirectly through some form of community service, there is a reported reduction in recidivism. No statistical data were given to support this claim (Blagg, 1985).

Diversion programs initially focused upon controlling or changing adolescents' behavior (Vaughn, 1985; Rothstein, 1985). Many current programs also take this approach (Walter & Gilmore, 1973; Fleischman & Szykula, 1981). However, diversion programs have been influenced by what is happening in the parent education arena outside of youth court. Before discussing the diversion programs incorporating communication skills training from the parent education field, the background and history of the evolution of parent education and training will be discussed.

Overview of Parent Education and Training

Parent education has a long and well-documented history in this country (Richardson, 1927; Schlossman, 1976), but current parent education and training research often over-
looks this past, and dates its beginnings in the 1960's (Schlossman, 1976). Current parent education and training began in the 1960's with Operation Head Start (White, 1975), which was designed to benefit low-income families. Since that time parent education and training has typically been a middle-class experience which low-income families have had little opportunity to acquire (Goodyear & Rubovits, 1982).

Families seen in youth court often heavily represent low-income, rather than middle or high-income families. It does not seem likely that lack of parent education and training programs is correlated with a family's appearance in youth court, however, it does seem appropriate to ask whether programs developed for a middle-class family are generalizable to a lower-income population. This issue will be addressed further in the rationale for the proposed study. During the past two decades research and programmatic literature about parent education and training grew at a rapid rate; there was a literal explosion of parent education and training programs (Goodyear & Rubovits, 1982). Most of these programs are in a clinical setting, with the exception of Gordon's Parent Effectiveness Training (1971). While many deal with behavior modification (Walter & Gil-

Although there is a call for more research with valid methodology (White, 1975; Schlossman, 1976), parent education and training programs continue to show up with little or no research to support them, or with invalid or questionable methodology (Blechman, 1980; Goodyear & Rubovits, 1982). Programs supported with research often continue to use no controls (Fleischman & Szykula, 1981; Pevsner, 1982). Results from these programs indicate that in clinical settings groups often work better than individual therapy (Pevsner, 1982) and that when a control is used, the treatment group does significantly better than the control (Walter & Gilmore, 1973; Patterson, Chamberlain & Reid, 1982). All of these programs are considered successful; however, do they lend themselves well to a youth court provided communication training program?

In 1970 the most widely used parent education and training program began. This is the Parent Effectiveness Training (PET) program (Gordon, 1971). Gordon reports in
that more than 250,000 parents attended workshops. Since that time more workshops have become established; some are offered on a regular basis and it is estimated that well over a half-million parents have received such training (Taylor & Swan, 1982). As with most such programs, however, PET is generally aimed at middle-class parents.

While parents report being highly satisfied with PET and believe it generalizes to the home environment (Gordon, 1974), other research on the PET program shows a slightly different perspective. Parents with PET training seldom do better than control groups when taking the Parent Effectiveness Training Test six months to a year after training (Geffen, 1977). For reasons still unexplainable, adolescents report that their parents use PET skills in the home less than half as often as their parents report using them (Taylor & Swan, 1982).

Despite these inconsistencies, many parent education and training programs are very similar to the basic tenants of PET. That is, they are based on basic communication skills, such as active listening, "I"-messages, and conflict resolution or problem solving (Bright & Robin, 1981; Foster, et al., 1983; Robin, et al., 1977). What these programs
also have in common is their clinical, rather than community, setting. The issue of generalizability to the home setting is also addressed. Results show when homework is assigned generalizability occurs more often than when no homework is assigned (Foster, et al., 1983; Robin, 1981; Robin, et al., 1977).

It appears White (1975) accurately foresaw the growth of and demand for parent education and training. Yet with the predominantly clinical or community setting, the question still remains, will a communication based program work with a court referred population? Youth court diversion programs which are not communication based have already been presented. The following section will address youth court diversion programs which are oriented toward parent education and training and are based on, or incorporate some form of, communication skills training.

**Parent Training and Communication Oriented Diversion Programs**

As early as 1973 research was being done with court-referred delinquent families (Alexander & Parsons, 1973). This program focused upon contingency contracting, that is,
informal contracts which the family negotiates to modify some aspect of family behavior, and clarity of communication. This research was systems based, used an alternative therapy group, and also control groups for maturation and attention. The results showed recidivism rates were significantly lowered as well (Alexander & Parsons, 1973).

Clarity of communication became an important consideration in this research as delinquency development indicates that parents of delinquents often set too many rules, are unclear about rules, inconsistent with their use of punishment, and generally lacked structure in the home (Alexander & Parsons, 1973). Clear communication was seen as a way to deal with these variables.

In 1974, Kifer, et al., continued researching modification of communication processes. Their procedures were designed for people who already had their emotional behavior under reasonable control, but using a "cooling off" period was stressed for times when the emotions were still high. Negotiation was used, rather than contingency contracting, as a problem solving skill. Results indicated that the procedures were successful in training youths and their parents and that these behaviors were generalizable to the
home; however no control group was used and only three parent-child dyads were involved (Kifer, et al., 1974)

While this type of research was looking for a way to reduce recidivism rates, and improve family interactions, it was not known which variables correlated with delinquent behavior. However, in 1984 Patterson & Stouthamer-Loeber worked with approximately 200 delinquent families who followed through to completion. Parents filled out questionnaires regarding home practices of monitoring, discipline, problem solving and reinforcing communication. Police reports and self-reports from the delinquents were used for follow-up.

Parent monitoring and discipline correlated most significantly with delinquency, and differentiated moderate offenders from persistent offenders. While a significant correlation was found between problem solving and reinforcing communication and delinquency, it accounted for the least variance. Patterson and Stouthamer-Loeber (1984) note that all family management skills are dependent on each other, and that communication is used to implement them. They conclude that further research into the role of communication in delinquent families, and the effect of communi-
cation training is needed.

The remaining programs all pay attention to some form of interpersonal and/or intrapersonal skills training. While the non-communication based programs appear to reduce recidivism rates by modifying the youths' behavior (Vaughn, 1985; Rothstein, 1985; Blagg, 1985), at the same time they do not always give the youth any improved ability to deal with either their home environment and/or their interactions with others. The three programs described next shift emphasis to communication skill building, as opposed to behavior modification, and hope to give the youth skills which will carry over into all areas of their life.

The Turning Point. Clifford's Turning Point Youth Services in Visalia, California is one of the most comprehensive of the skill building programs, particularly in terms of the variety of areas addressed and services offered. Four points are identified as critical for teens, if they are to avoid behavior which will return them to the court. 1) an adequate adult role model with whom to spend time, 2) learning that problem solving is not a 30-60 minute miracle as portrayed on TV, but needs skills and practice, 3) learning interpersonal skills, and taking personal re-
sponsibility, and 4) a Life Skills component which teaches some basics in dealing with their world (Clifford, 1985).

As an example of the variety of services offered a recreation component that helps teens gain self-esteem, communication skills and greater self-confidence is available in the Turning Point program. Individual, group and family counseling are provided with the emphasis upon family therapy. A number of community programs are available, such as parenting classes, and assistance is given to schools in developing prevention programs based on promoting positive behaviors and skills. While the program for adolescent skill building is perceived as successful, no research evidence or recidivism rates are offered as proof (Clifford, 1985).

The Bridge. What The Turning Point and The Bridge have in common is that both are used as diversion programs by the court, but are not court programs. That is, the court does not conduct these programs, but refers families to them.

The Bridge in Atlanta, Georgia, ("American Family," 1981) is a family counseling center which uses mediation between teens and parents as a problem solving tool. While The Bridge was originally opened in 1970 to deal with run-
aways, it now receives referrals from juvenile courts, the Department of Human Resources, drug programs, schools, mental health agencies, churches and former clients. It also provides short-term crisis intervention and long-term counseling.

A premise of The Bridge is that during the process of mediation, problem solving skills can be taught to the family, and these skills may generalize to help solve future problems in the home setting. The Bridge has worked with over 3,700 people and follow-up studies show that approximately 50-70% of the family intervention cases are successfully resolved. While these statistics are offered as support, unfortunately, how "success" is defined is not mentioned (Anonymous, 1981). The Bridge and The Turning Point are court referred programs, and it was programs such as these that helped pave the way for an extensive state wide program in Massachusetts.

The Children's Hearing Project. Massachusetts was one of the first states to decriminalize status offenders, doing so in 1973. While decriminalization was intended to take status offenders out of the court system and into the social services system, this objective was never fully realized.
While some status offenders are referred into the social services system, most are still referred into the juvenile court system because of case load capacities in social services (Merry & Rocheleau, 1985).

In response to status offenders still being referred into the juvenile court system in 1980, the Children's Hearing Project (CHP) began an experiment; to use mediation in family conflicts involving rebellious and truant adolescents. Rather than focus on the child as the problem and the juvenile court or diversion programs as the process for solution, CHP focuses on the entire family system. This focus on the family system sets the CHP program apart from others.

CHP's criticism of the current status offender category is that it focuses on the misbehavior of the child, rather than the problems in the functioning of the family, despite the consensus among social scientists that these are family problems (Patterson, 1984). By putting the focus on the family process, rather than on the adolescent, the potential for improved family communication exists. In mediation, the teen is not labeled "status offender," in fact, labels are not used at all. The CHP staff provides mediation between
child and parent to produce a written contract governing the family's future relations. The families in this program choose mediation as a diversion program.

Families in the year and a half study were enthusiastic about the process (Merry & Rocheleau, 1985). Although many families said that the specifics of the contract were often not adhered to, they still felt they would try mediation again in the future. They felt it had helped overall with family processes (Merry & Rocheleau, 1985).

After two years, Massachusetts adopted the CHP program on a state-wide basis because of its success. CHP's goal was to have automatic dismissal of the case from youth court with acceptance of mediation by teen and family. However, for unknown reasons, the courts failed to provide for dismissal of cases upon referral to mediation.

Another goal of the project was to show that the category of status offenders could be abolished, if voluntary, family-centered mediation were utilized soon enough, eliminating the necessity of involving the court at all. However the CHP program has become simply another service recommended by the court (Merry & Rocheleau, 1985).

While the CHP and The Bridge programs are quite differ-
ent in the way they operate, they have one thing in common. Both, through different methods, teach the whole family communication skills which hopefully will continue to be used (Merry & Rocheleau, 1985; "American Family," 1981).

Critique and Rationale for Proposed Study

For the most part, the current court system focuses on the child and urges better behavior with threats of punishment if it is not forthcoming (Blagg, 1985; Rothstein, 1985; Vaughn, 1985). When diversion programs are used which focus on the family, rather than the adolescent, recidivism is significantly reduced (Alexander & Parsons, 1973; Emshoff and Blakely, 1983; Kifer, et al., 1974). While some of the programs which focus on the family have had research weaknesses (e.g., no control groups, only self-report measures, etc.), others have provided research with much heuristic value.

It seems clear that if the problem of adolescent misbehavior which brings the youth to the attention of courts is to be changed, that family interactions must first be changed (Alexander & Parsons, 1973; Emshoff & Blakely, 1983; Patterson & Stouthamer-Loeber, 1984). Through acquisition,
practise and use of new communication skills, eventually patterns of family functioning may change over time (Galvin & Brommel, 1986). It is the purpose of this study to further research into this area by looking at the effect of communication training on the family.

A communication skills training program was developed for Missoula Youth Court and was used as a parent component to the already existing communication skills program for adolescents referred by youth court. The program was family systems oriented (Galvin & Brommel, 1986), that is, parents and youth received the same information, and also practiced problem solving skills together. The main area of focus was the family, rather than the adolescent, because adolescent misbehavior is a symptom of dysfunction in the family system (Patterson, 1984). Focusing on only the youth has not been as effective in reducing recidivism rates as working with the family (Bird, et al., 1978).

One of the more effective communication training programs reported is the Alexander and Parsons study (1973). This was a short-term (4 to 6 week) intervention with training in clarity of communication and contingency contracting as a problem solving tool. Changing family communication
behaviors was shown to be an effective way to change adolescent behavior, and significantly reduce recidivism rates. Recidivism in this study was 26%, compared to 47% for client-centered family group therapy, 73% for eclectic psychodynamic family treatment and 50% for no treatment. Alexander and Parsons (1973) see their results as having important implications for implementing family treatment programs, and for giving direction for further studies. The current study drew from Alexander and Parsons and was intended to extend their findings. The importance of further research into the role of communication in delinquent families, and the effect of communication training, is also noted by Patterson and Stouthamer-Loeber (1984).

Goodyear and Rubovits (1982) note in their review of parent education and training that all programs use one or more of three basic training foci: a) interpersonal skills (Gordon, 1971; Satir, 1972; Steiner, 1974), b) family management skills (Dreikurs, 1964; Steiner, 1974), and c) knowledge (or information) (Spock, 1961). Each has its benefits in a training situation.

Interpersonal skills. Interpersonal skills help people to more effectively communicate with one another, and more
effectively manage conflict when it arises (Adler & Towne, 1984).

Family management skills. Family management skills emphasize skills of controlling or shaping behavior within the family. Goodyear and Rubovits (1982) point out that parents who are struggling to meet basic survival needs are interested in family management skills ("How can I get this kid to do his chores, and give me some peace and quiet?") to help make life bearable, before they are able to generate interest in interpersonal skills.

Knowledge. Knowledge is usually presented as a conceptual framework for the parenting skills being taught (Goodyear & Rubovits, 1982; Spock, 1961).

A Communication Skills Training Program for Youth Court

In designing the communication skills training program for families referred from youth court, it was important to take into account which skills the parents may have perceived as most important, as well as which skills the youth or trainer perceived as important. While the Alexander and Parsons (1973) study focused on interpersonal skills, given the benefits that each of the three training foci may pro-
vide, this study used each foci in the following manner.

Information about parenting and adolescence was presented and used as a conceptual framework and background for the skills being taught. Some family management skills (i.e., positive reinforcement) were presented in the beginning to help the parents feel they were gaining some control over their lives. This was done first to help create some feeling of confidence in the program before introducing skills and ideas that might be new, and perhaps to some, threatening (Goodyear & Rubovits, 1982).

While these two training foci were included for the benefits they provided, they were minor areas of the study. As all family skills are dependent on each other, and communication is used to implement them (Patterson & Stouthamer-Loeber, 1984), the main focus was upon interpersonal communication skills (i.e., "I" messages, active listening, problem solving). Incorporating interpersonal, family management and knowledge components into the program provided the basic skills shown as most successful in parent education and training research (Alexander & Parsons, 1973; Goodyear & Rubovits, 1982).
The study drew from and was similar to the Alexander and Parsons (1973) study in the following ways: a) it was short term (6 weeks, 8 sessions), b) drew from court referred families, c) was systems based, d) focused on communication training, e) had a no-treatment group that controlled for maturation, and f) had court officers continue contact with no-treatment families to control for attention.

The study differed from the Alexander and Parsons study in that it was a) more intensive, a total of 14 hours, b) included a broader base of communication skills, c) included homework assignments, to improve generalized use of skills to the home environment (Robin, 1981; Robin, et al., 1977), d) used the no-lose problem solving model for conflict management, rather than contingency contracting, because of its potential for generalization to a wider variety of situations (Adler & Towne, 1984), and e) did not use recidivism as a measure, but rather communication measures (e.g., Hecht's Measure of Communication Satisfaction, the Putnam/Wilson Conflict Styles Instrument, and the FACES II. See Chapter III). In addition, while sessions one, and six through eight were conducted with all families together, during sessions two through five parents and adolescents
were separated. The information each group received was the same, but the method of instruction was modified to adapt to the specific audience. The following section outlines the training sessions and components of the program.

Components of the Communication Skills Training Program

Session one. The first session introduced a brief background of parent/adolescent relationships, and why they may be different today, compared to other generations. This knowledge was meant to help parents understand the external influences upon their family systems, and lower defensive attitudes about what being in the program may imply about their parenting abilities (O'Brien, 1979). An overview of the program was given, and the pre-tests taken.

Session two. The second session included stress management and dealing with anger. Stress and anger have been shown to be highly significant variables in relationship to dysfunctional family systems (Kempe & Kempe, 1978, 1984; Tavris, 1982).

Sessions 3 - 5. Sessions Three to Five introduced interpersonal skills which were the main emphases of this program. The skills presented were basic communication
components such as "I" messages, clear language, positive reinforcement, and active listening. These were practiced as they were introduced and reviewed prior to beginning the conflict segment. Clear language and "I" messages are important in helping to clearly convey to another what is meant, without clarity misunderstanding often leads to conflict (Adler & Towne, 1984).

Active listening and positive reinforcement are important parenting skills (Gordon, 1971; Patterson & Stouthamer-Loeber, 1984) and improve family communication by showing that communication is important when coming from child to parent, as well as, from parent to child (Galvin & Brommel, 1986).

Sessions 6 - 8. The final sessions, six through eight, covered styles of conflict and the no-lose problem solving model. While the first interpersonal skills introduced made using this model easier, it was the problem solving approach which showed the most significant results in most recent research (Bright & Robin, 1981; Emshoff & Blakely, 1981; Foster, et al., 1983; Robin, 1981).

Problem solving was discussed in theory, then the seven-step model was practiced through role play, first
separately, and then practiced with parents and adolescents together. Homework was also assigned. The use of role playing and homework significantly improves the generalization to home environments (Alexander & Parsons, 1973; Pevsner, 1982).

The families in this training program received training in communication skills that may help them improve family management and problem solving, which in turn may strengthen the family system (Galvin & Brommel, 1986). In many families improving problem solving skills also improves communication, decreases fighting and strengthens family relationships (Foster, Prinz, & O'Leary, 1983). An outline of all training sessions may be found in Appendix B.
CHAPTER II
THEORETICAL FRAMEWORK AND HYPOTHESES

Communication training of parents is an outgrowth of parent education in general, and parent education is not a new idea. Since early colonial times churches have attempted to educate parents about how to raise moral children (Schlossman, 1976). In the 1880's parent education expanded into the social and school environments largely because of G. Stanley Hall's child-study movement, and the creation of the Parent Teacher Association (PTA) in 1897 (Schlossman, 1976). The 1920's are even called the "Heyday of American Parent Education," because of the vastness of the PTA by that time and the rapid increase of organizations dealing with parent education (Richardson, 1927, p.562). The 1960's are viewed as the beginning of the "modern" parent education movement with the Operation Head Start program for children of "underprivileged" parents (White, 1975). Soon parent education encompassed all segments of society and eventually included training in communication skills (White, 1975). White (1975) predicted that parent education and training would become the "clarion call" of the next two decades.
that is, parent education would be seen as so important that programs from many different disciplines would be created in large numbers.

White (1975) appears to have been right. Certainly parent training and education has abounded in a variety of contexts. Programs of various kinds have sprung up in psychological and psychiatric clinics (Alexander & Parson, 1973; Bright, 1981; Foster, Prinz & O'Leary, 1983; Patterson, Chamberlain, & Reid, 1982), in schools (Blechman 1980; Gordon, 1971, 1974), in community settings (Baizerman, Skelton & Pierce, 1983; Goodyear & Rubovits, 1982; Fleischman & Szykula, 1981; Gentry & Brisbane, 1982) and even in connection with courts (Blagg, 1985; Emschoff & Blakely, 1983; Landau & Nathan, 1983).

The parent education programs most commonly researched and reported tend to be, a) set in a psychology or psychiatry clinic, b) conducted by a therapist, c) involve therapy, and d) may or may not involve some form of communication skills or problem solving training (Foster, et al., 1983; Patterson et al., 1982; Pevsner, 1982; Robin et al., 1977; Walter and Gilmore, 1973). While reported as successful, comparison between different parent training and education
programs is difficult since measures for success vary widely. Success is usually based upon one or more areas, a) increased use of problem solving skills as reported by questionnaire (Foster, 1983), b) improved communication indicated by self-report (Robin, et al., 1977), c) decrease of targeted deviant behaviors observed in treatment condition (Walter & Gilmore, 1973, or d) naturalistic observations and parent report (Fleischman & Szykula, 1981). Findings in general are encouraging about parent education, but as currently reported it is not known whether they are easily generalized to court referred parents.

Research dealing with court referred parents has its problems and its successes. Communication training for court-referred parents and/or youth is often not well researched. For example, Kifer, et al., (1974) trained pre-delinquent youth (e.g., youth who are repeat status offenders perceived as on the way to delinquency) and their parents to negotiate conflict situations. Only three parent-child pairs were in the study, and no control groups were used. The Children's Hearing Project in Massachusetts (Merry & Rocheleau, 1985) used mediation as a tool to help solve a current problem and also train families in problem
solving skills for use in the home. This otherwise excellent program used only self-report for follow up measures, and no control groups. As such, little measurement as to program effectiveness has been conducted.

While lack of controls for either maturation or attention occurs frequently in research with court-referred populations, yet there are notable exceptions such as the Alexander and Parsons (1973) study. Families of youth designated as delinquent by the court participated in a short-term program designed to increase family reciprocity, clarity of communication, and contingency contracting as a tool for problem solving. Successful results were shown by significant changes in three family interaction measures and significantly reduced recidivism rates over an 18 month period. This study included controls for maturation and attention placebo, and neither group showed significant results of any kind (Alexander & Parsons, 1973). Additionally, two treatment conditions representative of often used family therapy were included. Results were little different from other controls (Alexander & Parsons, 1973).

This research is also significant because of its family systems conceptualization of adolescent deviant behavior,
"...changes in interaction were related to decreased recidivism rates, while families that demonstrated no changes in interaction also demonstrated no reduction in recidivism." (Alexander & Parsons, 1973, p. 224). So there is a relationship between changes in family interaction and changes in the adolescent's behavior.

Focusing on the family per se is apparently not sufficient to modify family interactions patterns or reduce recidivism rates, since the family therapy controls showed no significant results (Alexander & Parsons, 1973). It appears that family intervention which focuses on changing family communication in the direction of increased clarity, reciprocity and problem solving skills is most effective.

Theoretical Framework

Systems. Members of a family may be looked at individually, in a nonsystemic approach, or as a whole, in a systemic approach (Littlejohn, 1983). The differences between these two approaches is described by Littlejohn (1983) who suggests that a nonsystemic view of a family, looking at the individual members only as a collection, is like saying the "...whole is merely a collection with no
unique qualities of its own, like a box of stones" (p. 30).

Systems are defined as a set of objects or entities with relationships between one another and their attributes (interrelatedness or interdependence), to form a whole (Littlejohn, 1983; Watzlawick, Beavin, & Jackson, 1967; Wilmot, 1987). Using this definition, the system would be the family and the objects or entities would be the members of the family. Interrelatedness within a system describes the dependence each part has upon the other for their functioning. Thus, family members are interdependent upon each other for the functioning of the family (Galvin & Brommel, 1986). The concept of "wholeness" is important to systems. It implies that the whole is greater than the sum of its parts (Galvin & Brommel, 1986). That is, that the interactions of a family together give it unique qualities that are greater than, or not accounted for by, the sum of the individual members personalities.

Satir (1972) illustrates this interdependence and wholeness of the family by using a hanging mobile to discuss systems. Imagine a mobile hanging by a window, with a shell on the end of each string. If one shell is touched, its movement will cause the other shells to move. If a breeze
comes along and blows all the shells, then the most movement is achieved. Events which affect one member of the family affect all members (Satir, 1972). If Mom gets a raise, big brother graduates, little sister gets sick or Dad gets transferred, this event will affect other members, depending on each member's relationship with that individual (Satir, 1972).

Thus, when change occurs in one person in a system, its effects are felt throughout the system (Wilmot, 1987). Every part of the system is so related to every other part that changing one part will cause a change in all parts and in the whole system, because a system behaves as an inseparable whole, not as a simple group of independent parts (Watzlawick, et al., 1967).

Returning to the shell mobile analogy, even as more movement occurs in the mobile when more shells were caught in the breeze, more change may occur in the family when more members are involved in that change. Training parents in communication skills, rather than just the adolescent who comes to the attention of youth court, may strengthen and reinforce the family system, causing it to operate at more functional levels (Galvin & Brommel, 1986). As the Alexan-
der & Parsons (1973) study showed, when family interactions change, adolescent behavior changes. The systems approach looks at the whole family, and does not label the individual. For these reasons, both parents and adolescents will participate in the proposed study.

The model for family systems which will be used in the proposed study is the circumplex model (Galvin & Brommel, 1986; Olson, Sprenkle, and Russell, 1979). This model attempts to integrate the numerous concepts related to family interaction by looking at three dimensions: (1) cohesion, (2) adaptability, and (3) communication. The two central dimensions, cohesion and adaptability, are perceived by Olson, et al., as the intersecting lines of an axis (see Appendix A).

Cohesion refers to the emotional bonding in a family between members, and also the degree of personal autonomy each member experiences (Olson, et al., 1979). Communication develops, maintains or changes a family's patterns of cohesion (Galvin & Brommel, 1986). The cohesion axis uses four words to describe several types of family cohesive behavior: disengaged, separated, connected, and enmeshed. Disengaged families tend to experience very little closeness
or family solidarity, however, individual members have high autonomy and individuality. Separated represents behavior where a family experiences closeness and autonomy, with individuality having some priority over closeness. Connected families would give closeness some priority over autonomy. At the other extreme end of the axis, enmeshed families bond so closely that individual members "experience little autonomy or fulfillment of personal needs and goals" (Galvin & Brommel, 1986, p. 15; Olson & McCubbin, 1983). Disengaged and enmeshed are considered extremes, while separated and connected are considered balanced areas.

Adaptability describes the ability of the family system to make changes in the way they relate and communicate, "the ability of a marital/family system to change its power structure, role relationships, and relationship rules in response to situational and developmental stress" (Olson & McCubbin, 1983, p. 62). Over time all families experience change as they go through various developmental stages. Adaptability, or ability to change, is also described by using words to represent four types of family behavior: chaotic, flexible, structured, and rigid. The chaotic family experiences a great deal of extensive change, to the
point where they have little opportunity to develop relationships and common meanings. Flexible families show a willingness to change, and also value consistency. Structured families prefer stability to change, but will consider change. And, finally, rigid families repress change and growth. Chaotic and rigid are considered the extremes, and structured and flexible are considered the most balanced areas (Galvin & Brommel, 1986).

Finally, communication is the facilitating dimension which enables families to move along this axis. If there are changes in family communication, these changes will be reflected in a change of placement on the cohesion/adaptability axis (Olson, et al., 1979; Olson & McCubbin, 1983). Communication is viewed as most functional when it is in the central area of the cohesion and adaptability axis, and is perceived as less functional when in the outside areas of the axis (Galvin & Brommel, 1986). While for families in general behavior styles are designated as extreme or balanced, all areas may be appropriate for a specific family at a specific time. For example, after the death of a family member, other members may become enmeshed for a while to give extra support. A young married couple may still have
extensive and close ties with family members and childhood friends and so would be described as disengaged for a while. Only when a particular type of family behavior is not allowing the family to reach its goals does it become dysfunctional (Galvin & Brommel, 1986; Olson and McCubbin, 1983).

Once the family system's usual style is understood, the system can be altered if it is dysfunctional for their goals (Hocker & Wilmot, 1985).

**Communication satisfaction.** Within the systems perspective, communication satisfaction is one criterion for assessing process variables of actual communication behaviors (Hecht, 1978a). Satisfying communication plays a central role in the development and maintenance of mentally healthy and functional families (Rogers, 1961), and so appears to be a relevant and important variable in family systems. When communication behavior changes communication satisfaction changes also (Hecht, 1978b). One goal of the study is to change communication behavior. If change has occurred in communication behavior, it may be measured by measuring communication satisfaction (Hecht, 1978b). Therefore, Hecht's Measure of Communication Satisfaction was used to measure changes in perceived communication satisfac-
Conflict behavior. Conflict behavior has been specifically chosen as a variable for this study for two reasons. First, unsatisfactory problem solving skills in the family have been identified as correlating with delinquent behavior (Patterson & Stouthamer-Loeber, 1984). Secondly, conflict does not differentiate functional families from dysfunctional families, but rather how that conflict is dealt with, that is, what conflict behavior is used (Galvin & Brommel, 1986).

Because conflict behavior has been correlated with delinquent behavior, and because it may distinguish functional families from dysfunctional families, it is an important variable. Putnam and Wilson (1982) describe conflict behavior and place it in one of three styles: nonconfrontation, solution-orientation and control. The solution-orientation style of conflict behavior is very similar to the democratic style of parenting described by Blechman (1980) as correlating with a lower incidence of delinquency. If family systems change their conflict behavior style away from nonconfrontation and control toward solution-orientation, it is possible that adolescent behavior will move away.
from delinquency. Improved problem solving skills have already been shown to have a high correlation with lowered recidivism rates (Kifer, et al., 1974; Patterson-Stouthamer-Loeber, 1984). For these reasons conflict behavior is an important variable, and problem solving skills will be the main focus of the study.

Hypothesis

To link research about communication training and the cohesion/adaptability, communication satisfaction and conflict styles variables, the following hypotheses are offered:

\( H_1 \) In families receiving communication skills training, both parents and adolescents will have a significant change in cohesion and adaptability axis from pre- to post-treatment measures.

\( H_2 \) In families where parents and adolescents receive communication skills training, both will have a significant increase in communication satisfaction from pre- to post-treatment measures.

\( H_3 \) In families where parents and adolescents receive communication skills training, both will have a significant increase in the use of solution-orientation style and a decrease in the use of control and nonconfrontation styles from pre- to post-treatment measures.
Subjects

The population of interest was families where an adolescent family member had come to the attention of the Missoula Youth Court due to a status offense. Forty subjects from 15 families were randomly assigned by family to one of two conditions: treatment or no treatment. Initially there were six families in the treatment group and nine families in the control group. Further information on the distribution of subjects may be found in the following chapters. Data were gathered from all subjects, both parents and youth.

Materials

Three quantitative measures were used as pre- and post-treatment measures in this study: the Family Adaptability and Cohesion Evaluation Scale II (FACES) (Olson, Portner, & Bell, no date), Hecht's Measure of Communication Satisfaction (Hecht, 1978), and the Putnam/Wilson Conflict Styles Instrument (Putnam & Wilson, 1982; revised Wilmot, 1985). A
post-questionnaire was also included to obtain subjective self-report data (Appendix F). Demographic information was supplied from the subject files through youth court.

**Family Adaptability and Cohesion Evaluation Scale (FACES II).** This study was done from a systems perspective, and used the circumplex model of family systems (Olson, et al., 1979), with its dimensions of cohesion and adaptability. These two dimensions, with communication as the facilitator, are used to describe types of family interaction. The FACES II scale was designed to measure the dimensions of cohesion and adaptability on the circumplex model. Each dimension is measured and then a cross point is plotted on the axis which places family interaction into one of sixteen types of family behavior (Appendix A).

FACES II was developed by David H. Olson, Joyce Portner and Richard Bell at Family Social Sciences at the University of Minnesota. It was specifically chosen for this study for its' ability to measure family cohesion and adaptability. It was also chosen for its' high reliability and validity, as demonstrated during research for Family Social Sciences at the University of Minnesota.
Hecht's Measure of Communication Satisfaction. The Hecht Scale (Appendix D) is currently the only measure of communication satisfaction in interpersonal settings, although there are a number of measures of communication satisfaction in organizational settings (Hecht, 1978). It is designed to measure communication satisfaction in a specific, actual, or recalled conversation with another person perceived to be a friend, acquaintance, or stranger.

This 19-item self-report scale is transactional and behavioral in perspective, which makes it appropriate to measure outcome of communication training in a system. It uses a seven scale Likert technique. The Likert items range from strongly agree to strongly disagree. Test-retest reliability and validity for the Hecht Scale is between .90 and .97 (Hecht, 1978). High reliability and validity are one reason this scale was chosen.

Another reason for appropriateness of the communication satisfaction scale is that it measures communication satisfaction by using current or recalled conversations. By asking the subjects to use the most recent problem solving conversation in the family on both the pre- and post-test measures, this scale may detect changes in communication
satisfaction within the family environment. The Hecht Scale was given before and after communication training for problem solving.

The Putnam/Wilson Conflict Styles Instrument. The Putnam/Wilson questionnaire was developed to meet standards of reliability and validity for the measurement of interpersonal strategies and styles in conflict management (Putnam & Wilson, 1982).

The development of this scale assumes that conflict strategies are those communication behaviors that provide a means for handling conflict. Participants are assumed to make choices about behaviors by considering their own goals and anticipated goals of others (Putnam & Wilson, 1982).

The Putnam/Wilson instrument consists of 35 questions, with seven step Likert scales for response. It measures three conflict styles: nonconfrontation, solution-orientation and control.

Nonconfrontation behavior has been described as: avoiding the topic, keeping quiet, downplaying the importance, withdrawing when confronted, making differences seem less serious, and holding tongue rather than argue. Solution orientation behavior has been described as: blending ideas
with others to create new solutions, combining viewpoints, giving in a little, sticking with the issues, willing to go 50-50, willing to make trade-offs, and encourages working together. Finally, control has been described as: insisting on own position, minimizing significance of conflict, hitting fist on table, raising voice, asserting opinion forcefully, dominating arguments, and refusing to retreat or compromise. A copy of the Putnam/Wilson scale appears in Appendix E. Using this scale as a pre- and post-treatment measure showed whether participants in the study moved towards a solution-orientation style, and away from nonconfrontation and control, after training.

Procedures

Subjects were referred by officers from the Missoula Youth Court. When an adolescent first came before the court they were assigned to an officer and an "intake" process began. During intake the officer assessed how youth court might best meet the needs of the youth and their families.

Youth court officers prescreened during intake to determine appropriateness for a communication training program. During intake, whenever possible, it was determined
whether or not the adolescent had suffered any physical or sexual abuse. Families where abuse had occurred were not included in training. This study provided communication and problem solving training, and communication training programs are not effective as the only treatment for abusive parents (Kempe & Kempe, 1978, 1984). Therefore, families where abuse had been identified were not considered appropriate for inclusion in this study, which did not offer therapy or counseling.

"Families" were defined as any persons living together who were recognized by the court as a legal family unit. This definition would include traditional families, families with step-parents, families with step-children, single parent families, and older sibling, grandparents, or family friends with permanent legal custody of the adolescent. In this study traditional families, single parent families, and one family consisting of an older sibling with custody of a younger sibling, were represented.

The training program was offered as an option to families, and only those families which volunteered participated in the study. Prior research has shown parents who voluntarily receive training do better, and that parents who are
nonvoluntary participants show little or no improvement (Baizermain, et al., 1983; DePanfilis, 1982; Gentry, et al., 1982). To prevent data from being negatively affected by the nonvoluntary attribute, which is not a variable of this study, only voluntary subjects were used. Some degree of self-selection was unintentionally involved and is discussed in more detail in the following chapters.

After subjects volunteered, they were randomly assigned in families to one of two experimental treatments, e.g., treatment or no treatment. Treatment assignment was made prior to pre-testing. When random assignment was completed, subjects were informed of when and where the first meeting was held.

Each treatment group received the same instructions and took the same pre-tests. The treatment group took the pre-tests during the first meeting. The control group took the pre-test during the meeting with their probation officer.

Before pre-testing, all subjects were asked to sign release forms: one for participants, and one for controls (Appendix G). The release forms explained the nature of the research, guaranteed confidentiality and expressed the willingness of the researchers to answer any questions the
participants might have following the study. The following instructions were then given:

"Thank you for coming to our program. (This first sentence was left off for the control group.) Before we get started there is a questionnaire I'd like each of you to fill out. There are four parts to it, and before each part I will briefly explain any instructions to fill out that part. There are no right or wrong answers. This isn't a "test" - it's a chance to find out about your family's styles of communication."

Attendance to at least 5 of the 8 training sessions was required of the treatment group, with sessions 7 and 8 required to be included in those 5 sessions. This was done to assure that the treatment group had received sufficient training, and covered the problem solving sessions. Lack of attendance has been reported as a problem for parental training sessions (Goodyear & Rubovits, 1982) and this study tried to control for attendance. The control group was required to have met with their probation officers at least five times during the course of the study to control for similar amounts of time spent with each group. While treatment families came to the training sessions, families in the control group continued to interact with their youth court probation officers to also control for attention.

Prior to the start of the study a family who had pre-
viously been involved with youth court took the test measures and circled any words, questions or statements which they did not understand. The family consisted of a mother, a father, and two teens, 13 and 17 years of age. The father had some high school education, and the mother had a GED. No circles appeared on any of the test measures.

Families in the treatment group were given an overview of the program and an introduction. Sessions one, seven and eight were done with the family together. During sessions two through six parents and youth were divided into two groups. The skills training in each group covered the same skills, but the information was presented in a manner appropriate for either parents or youth. The following outline provides a brief description of the training sessions:

**Outline of Training Sessions**

- **Session One:** Pre-tests, overview and introduction.
- **Session Two:** Dealing with anger/feelings
- **Session Three:** Clear language, introduce "I" messages.
- **Session Four:** Practice "I" messages.
- **Session Five:** Active listening, introduce No-lose problem solving model.
- **Session Six:** Practice active listening, role play and discuss problem solving model.
- **Session Seven:** Families together again, role play problem solving with low risk problem.
- **Session Eight:** Debriefing, post-tests.
Sessions began February 19, and were held on Thursday evenings. Each session lasted from one and a half hours to two hours for approximately 14 hours total training time. Outlines of each training session appear in Appendix A.

Design

This study used a 2 x 2 design, with subjects randomly assigned to one of two treatment conditions. The independent variable was type of treatment, and dependent variables were measures of family cohesion and adaptability (FACES II), communication satisfaction (Hecht's Communication Satisfaction Scale), and conflict styles (Putnam/Wilson Conflict Styles Instrument). The scales were presented in a randomized order for both the pre- and post-measures.

The subjects were assigned to one of the following treatments:

Treatment I: 6 families, 12 subjects, received 14 hours of communication and problem solving training.

Treatment II: 6 families, 12 subjects, did not receive communication training and continued to interact with their officers for attention control.
Two-tailed tests of significance were run on the FACES, Hecht's Communication Satisfaction Scale, and the Putnam/Wilson Conflict Styles Instrument, to determine if there was a significant movement toward change in conflict or family styles.
CHAPTER IV

RESULTS

This chapter describes the results of the data analyses. First demographics will be reported, then results will be discussed in the same sequence as hypotheses were presented.

Demographics

Both the control and the treatment groups finished with six families. The Information on demographics was obtained from family files and/or supplied by the probation officer working with the family.

Treatment families. Family incomes fell into two categories: under $15,000 per year and over $15,000 per year, with no one over $30,000 per year. 50% of the families were in each income category. The mean education level for parents was 11.5 years of school and the mean for the youth was 9.5. The mean age of treatment parents was 37 and of treatment youth, 14.

Control families. Incomes for control families was the same as for treatment families, 50% above and 50% below the
$15,000 level. Control parents had a mean educational level of 11 years of schooling, while the mean for adolescents was 9.8. The mean age of control parents was 38, with a mean age for youth of 15.

Results of Hypotheses

Two-tailed tests of significance were run comparing the independent variables (families receiving communication skills training, families not receiving communication skills training) with the dependent variables (Family Adaptability and Cohesion Scale, Hecht’s Communication Satisfaction Scale, and the Putnam/Wilson Conflict Styles Instrument). Three hypotheses were proposed about the effect of communication skills training upon families. One of these hypotheses was supported, and a portion of each of the remaining two was supported.

Several t-tests showed significance: cohesion for treatment families and adaptability for control families on the Family Adaptability and Cohesion Scale, Hecht’s Communication Satisfaction Scale, and the solution orientation style of the Putnam/Wilson Conflict Styles Instrument. No other measures revealed main effects in families.
Results will be discussed below for each hypothesis, and will report differences for families (combined scores for parents and adolescents), and then analyze differences for parents and adolescents.

**Hypothesis One.** The first hypothesis predicted that families which receive communication skills training would show a significant change on the cohesion and adaptability axis from pre- to post-treatment measures. There was a significant \( p = <.001 \) increase on the cohesion axis for treatment families, however, there was not a corresponding change on the adaptability axis. Control families showed an unexpected significant \( p = <.02 \) change on their adaptability axis. The cohesion variable of the hypothesis was supported, while the adaptability variable was not.

**FACES II** was used as the measure of family cohesion and adaptability. First, results will be reported by families (the combined scores of parents and adolescents), and then by parents and adolescents. Table 1 reports the between group means, and Table 2 shows the pre-to post-test means. The direction of change desired was toward the mean of each axis. Axis means are reported in each table.
Families. Table 1 shows there were no significant differences between families in the treatment group and the control group on pre-tests of cohesion or adaptability. The post-test adaptability also showed no differences; however cohesion means were 49.3 and 43.7 for the treatment and control families, respectively, showing significance (p = < .05).

Table 2 shows means from pre- to post-test. Treatment families showed a significant (p = < .001) change on pre- (49.3) to post-test (56.2) measures of cohesion. No significant change was shown for adaptability. Control families showed no significant change on measures of cohesion, but an unexpected significant (p = < .05) change was shown for adaptability.

Parents. Means between groups in Table 1 show that for parents, pre-test means for the treatment (54.7) and the control (49.2) were not significantly different for cohesion. Post-test measures of 54.2 (treatment) and 45.8 (control) were significantly different (p = < .05). No significant difference was shown for either pre- or post-test measures of adaptability.
Measures from pre- to post-test (Table 2) show that treatment parents had significance ($p < .001$ and $< .01$, respectively) on both cohesion and adaptability. Control parents showed no significant changes from pre- to post-test measures of either cohesion or adaptability.

**Adolescents.** Between group means (Table 1) showed that youth did not follow the same pattern that families and parents did. For adolescents there were no significant differences between groups for any measures of the FACES scale.

From pre- to post-test measures (Table 2) treatment adolescents showed a significant ($p < .01$) change in cohesion, but no significant change in adaptability. Control youth showed no significant change in either measure.
Table 1

$t$ Tests of the Difference Between Means for Treatment and Control Groups on the FACES Scale

<table>
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<tr>
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<td>48.8 (7.8)</td>
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* $p < .05$
(two-tailed test of significance for independent samples).

Family cohesion mean = 60.5; adaptability = 47.5.
Parent cohesion mean = 65; adaptability = 50.
Adolescent cohesion mean = 56; adaptability = 45.
Table 2

<table>
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<tr>
<td>Treatment</td>
<td>43.5 (3.8)</td>
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<td>-3.36**</td>
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</table>

* p < .001
** p < .02
*** p < .002
(two-tailed test of significance for independent samples).

Family cohesion mean = 60.5; adaptability = 47.5.
Parent cohesion mean = 65; adaptability = 50.
Adolescent cohesion mean = 56; adaptability = 45.
Hypothesis Two. The second hypothesis posited that families which receive communication skills training would have a significant increase in communication satisfaction from pre- to post-treatment measures. Hecht's Communication Satisfaction Scale was used as the measure. The hypothesis was supported for families; and, when looking at parents and adolescents, the results showed significance as well. The results for Hecht's Communication Satisfaction Scale are reported in Tables 3 (between groups means) and 4 (pre- to post-test means). Higher scores were reported for higher communication satisfaction, and lower scores for less communication satisfaction.

Families. For between group means (Table 3), treatment families had a pre-test mean of 4.10, while the control group had a mean of 3.15, which showed no significant difference between groups. The post-test means were 5.22 and 3.24, respectively, which showed a significant \( (p = .001) \) difference.

From pre- (4.10) to post-test (5.22) measures (Table 4), treatment families showed a significant \( (p = .001) \)
increase, thus supporting the hypothesis. Control families showed no significant change.

**Parents.** Table 3 shows that between groups pre-test means for parents were 3.98 for the treatment group and 3.86 for the control group. The means were not significantly different. Post-test means were 5.45 and 3.77 for the treatment and control parents, respectively; these means were significantly different \( (p < .05) \). Table 4 shows treatment families had pre- to post-test means of 3.98 and 5.45, respectively, which were significant \( (p < .001) \).

**Adolescents.** There were no significant differences between groups (Table 3) for the treatment and control adolescents on pre-measures, but there was significance \( (p < .01) \) on post-test measures between the treatment group, at 4.99, and the control group, at 2.70. From pre- to post-test treatment adolescents also showed a significant \( (p < .001) \) increase in communication satisfaction, while control adolescents did not.
### Table 3

**t** Tests of the Difference Between Means for Treatment and Control Groups on Hecht's Communication Satisfaction Scale

<table>
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<tr>
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</tr>
<tr>
<td>Pre</td>
<td>4.10 (1.24)</td>
<td>3.15 (1.04)</td>
<td>22</td>
<td>ns</td>
</tr>
<tr>
<td>Post</td>
<td>5.22 (1.29)</td>
<td>3.24 (1.10)</td>
<td>22</td>
<td>4.06*</td>
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</tr>
<tr>
<td>Pre</td>
<td>3.98 (.76)</td>
<td>3.86 (.66)</td>
<td>10</td>
<td>ns</td>
</tr>
<tr>
<td>Post</td>
<td>5.45 (1.19)</td>
<td>3.77 (1.03)</td>
<td>10</td>
<td>2.59**</td>
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<tr>
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<td>4.22 (1.67)</td>
<td>2.45 (.88)</td>
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<tr>
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<td>4.99 (1.45)</td>
<td>2.70 (.95)</td>
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</table>

* p < .001  
** p < .05  
(two-tailed test of significance for independent samples)

### Table 4

**t** Tests of the Difference Between Means From Pre- to Post-Test Measures on Hecht's Communication Satisfaction Scale

<table>
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<tr>
<th>Variable</th>
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<tr>
<td>Treatment</td>
<td>4.10 (1.2)</td>
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</tr>
<tr>
<td>Control</td>
<td>3.15 (1.0)</td>
<td>3.24 (1.1)</td>
<td>11</td>
<td>ns</td>
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<tr>
<td>Treatment</td>
<td>3.98 (.76)</td>
<td>5.45 (1.2)</td>
<td>5</td>
<td>-4.05**</td>
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<tr>
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<td>2.70 (.95)</td>
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</table>

* p < .002  
** p < .001  
*** p < .05  
(two-tailed test of significance for independent samples).
Hypothesis Three. Finally, hypothesis three stated that families receiving communication skills training would have a significant increase in the use of the solution-orientation style and a decrease in the use of control and nonconfrontation styles from pre- to post-treatment measures. There was a significant \( p = < .01 \) increase in the use of the solution orientation style, but not a corresponding significant decrease in the nonconfrontation or control styles. These changes were measured by the Putnam/Wilson Conflict Styles Instrument. Between group means are reported in Table 5 and Table 6 shows pre- to post-test means. An increase in usage is shown by a higher score, and a decrease in usage is shown by a lower score.

Families. No significant differences between groups (Table 5) were shown for treatment or control families on pre-test measures of confronting, solution orientation, or controlling. Additionally, no significant differences were shown on post-test measures of nonconfrontation or control. On solution-orientation, the post-test measures for the treatment and control families were 4.74 and 3.61, respec-
tively, indicating a significant \( p < .001 \) difference.

From pre- to post-test (Table 6) measures no significant changes were shown by the control families. Treatment families had pre- to post-test means of 4.30 and 4.74, respectively, showing a significant \( p < .01 \) increase in the use of the solution orientation style, which supported the hypothesis. However, there were no corresponding significant decreases in the use of the nonconfrontation or control styles, so the hypothesis was only partially supported.

Parents. Neither treatment nor control parents showed any significant differences on between groups (Table 5) pre-test measures of nonconfronting, solution orientation or control. On post-test measures of nonconfronting and control there were also no significant differences. However, on post-test measures of solution orientation the treatment and control parents were 5.16 and 3.79, respectively, indicating a significant \( p < .05 \) difference between groups.

On pre- to post-test (Table 6) measures, parents showed the results as families. The control parents showed no significant changes and the treatment parents showed a
significant \( p < .05 \) increase in the use of solution orientation style.

Adolescents. Youth showed no significant differences on between groups (Table 5) pre-test measures, however significant differences were found in post-test measures of nonconfrontation and solution orientation.

Table 6 shows no significant changes from pre- to post-test measures for control adolescents. Treatment adolescents showed a significant \( p < .05 \) increase in their use of the solution orientation style.

A more detailed discussion of all results, as well as trends which were noted, but not significant, will be presented in the following chapter.
Table 5

\textit{t} Tests for the Difference in Means Between Treatment and Control Groups for the Putnam/Wilson Conflict Styles Instrument

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\* \( p < .001 \)

\** \( p < .05 \)

\*** \( p < .01 \)

(two-tailed test of significance for independent samples).
Table 6  
*t Tests for the Difference in Means From Pre- to Post-Test Measures of the Putnam/Wilson Conflict Styles Instrument*

<table>
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* p < .01  
** p < .05  
(two-tailed test of significance for independent samples).
CHAPTER V

DISCUSSION

The purpose of this study was to research the effect of communication skills training upon family systems when an adolescent of that family is involved with youth court. This chapter will discuss these questions by first providing a summary of the findings and then discuss the findings by hypotheses. Next limitations will be looked at, and information for probation officers presented, with several anecdotal observations following. Finally, contributions and implications will be reported, directions for future research suggested, and then a brief closing summary.

Summary of Findings

Three measures were used to study the differences between families in the treatment and control groups before and after communication skills training. The FACES scale showed no significant differences between groups on the pre-test. Treatment families showed a significant increase pre-to post-test for cohesion, but not for adaptability. Control families showed an unexpected significant increase in
adaptability, but not in cohesion, as predicted. The control families stayed in the mid-range, while treatment families moved from mid-range into the balanced area of family behavior. Whether the first hypothesis was supported, depends upon whether one looks at the cohesion and adaptability variables separately, or whether one looks at movement from mid-range areas into balanced areas.

Hecht's Communication Satisfaction Scale reported a significant increase in treatment families' communication satisfaction. The second hypothesis was supported.

The Putnam/Wilson Conflict Styles Instrument showed no significant differences between treatment and control groups before training. Treatment families showed a significant increase in the use of the solution orientation style, but no significant decreases in other styles. The third hypothesis was also only partially supported. In the following sections each of these measures will be discussed in relation to the corresponding hypotheses. The treatment and control groups will be discussed as aggregate data of both parents and teens (families), then parents and adolescents will be discussed as subsets of the whole.
Results of Hypotheses

**Hypothesis One.** The first hypothesis posited there would be changes in cohesion (closeness or separateness) and adaptability (flexibility or rigidity). When there are changes in family communication, these changes are reflected by changes in placement on the cohesion/adaptability axis (Appendix A), as measured by the FACES II scale (Olson, et al., 1979; Olson & McCubbin, 1983). Movement on each part of the axis will be discussed first, followed by placement into an area of the axis.

**Cohesion.** There were no significant differences between the treatment and control families on the pre-test. Both placed in the disengaged level, which has the least amount of cohesion. On post-test measures the control families again placed in the disengaged areas, suggesting that no real changes in communication had occurred. These families did not appear to feel any closer on post-test measures than they had on pre-test measures.

Treatment families moved from the disengaged to the separated level. This move showed a heightening of involvement with each other, yet not to the degree where personal autonomy might be sacrificed. For families
experiencing the problems associated with a teen involved with youth court, this "drawing together" of the family represents a healthy move, in this case of working together more to solve the family problems, while allowing the personal freedom so essential to a teenager's individuation (Dinkmeyer & McKay, 1982). Both parent and adolescent individual post-tests had the same significant move, showing that everyone in the family was equally involved with the increase in cohesion. The hypothesis was supported that a significant increase would be shown on the cohesion axis.

Adaptability. While there were no significant differences between the treatment and control families on pre-test measures, they each were in different areas of adaptability. Treatment families were in the flexible area and control families were in the structured area, both close to the line between flexible and structured.

On pre-test measures, the control families were in the structured level. Control parents and adolescents each were in the structured level as well. On post-test measures, control families showed a significant ($p = < .02$) change. While the change from the structured area to the flexible area was made by both parents and adolescents, only the
adolescents' change was significant. This change was the most unexpected result from this study. While control parents made very few changes, their youth become significantly more adaptable. As the circumplex model shows, change in one area will influence the other areas (Olson, et al., 1979), and by changing their own behavior, the youth may effect the behavior of their parents. It was not known whether this change was a healthy survival tactic, or harassing behavior. So while the change was significant, it may not have been beneficial.

Although as a whole, treatment families remained in the flexible level from pre- to post-test measures, treatment parents showed a significant (p = < .02) change, moving from the flexible area to the chaotic area. The treatment adolescents made negligible movement from pre- to post-test measures, 43.5 and 43.0, respectively. This would appear to indicate that while the treatment adolescents were feeling closer to their families, they still found change to be risky.

The treatment parents did not appear to share this possible perception, and their significant move was another unexpected result of this study. It is possible that these
parents were "letting go" to a larger degree than necessary in an attempt to give their teens "room to grow." It seemed possible that these parents were willing to risk change, and thereby set an example for change that their teens might follow.

Wilmot (1987) notes when change occurs in one part of the system its effects are felt throughout the system, hence, the change in the parents from flexible to chaotic may effect, at some point in time, a change in the adolescents from structured toward flexible. Since a system behaves as an inseparable whole, not as a simple group of independent parts (Watzlawick, et al., 1967) the adolescents' position in the structured area may have an eventual balance upon the parents' swing into the chaotic area. When their teens are slower to try something new, the parents may have more time to evaluate which changes may be most beneficial for their family. While the adaptability portion of the hypothesis was not supported for families, there is reason to believe over time that it might be.

There appears at least one other way of looking at the treatment parents move into the chaotic area. This may not be a negative move at all. Since the cohesion and adapt-
ability axis is designed to measure the behavior of all types of families (i.e., single-parent, childless, young children, etc.), there is some basis for the argument that families with teens might need to be more adaptable, that is, willing to change, than other types of families (Galvin & Brommel, 1983). Teens are looking for their own identity and often feel a need to move away from and be different from their parents at times during this process (Dinkmeyer & McKay, 1982). The chaotic area might well serve a useful purpose for this stage in family development, for this population.

If a family's usual style does not allow them to reach their goals, then the family system can be altered to more readily do so (Hocker & Wilmot, 1985). For example, if Dad's insistence upon maintaining the same family rules now that applied for him as a youngster (current family style) does not allow them to reach their goal (respectful, obedient children), then Mom and Dad may decide to try using a family council approach where the teens have some input into the rules (changing family style).

Adaptability is the ability of a family system to change a variety of characteristics in response to their
current situation (Olson & McCubbin, 1983). Therefore, the move into the chaotic area does not mean chaos, but rather that the parents have decided to be willing to be extremely flexible or changing to reach their goal of greater family harmony. While the adaptability axis portion of the hypotheses was not supported, the results do not appear to conflict with the research.

Cohesion Adaptability Axis Areas. When families are experiencing dysfunction they often place in the extreme areas of the circumplex axis (Galvin & Brommel, 1986). On pre-treatment measures, neither the treatment nor the control families were in the extreme areas as might be expected for families in trouble. However, since all subjects were volunteers, it is possible that those families who might have fallen into the extreme areas were not as likely to volunteer for a communication skills training program. They may have felt that their problems were too difficult for the program to affect, or that their problem was not family communication, but the teenager who was acting out.

Control families began in the disengaged-structured area and ended in the disengaged-flexible area, both mid-range types of family behavior. Control parents and adoles-
cents fell into the same areas from pre- to post-test as the families did. Treatment families began in the disengaged-flexible area (mid-range) and ended in the separated-flexible area, which is balanced. Parents began and ended in mid-range areas, from disengaged-flexible to separated-chaotic. Treatment adolescents moved from mid-range to balanced, i.e., from disengaged-structured to separated-structured. When looking at cohesion and adaptability as a whole, then, treatment families did move into the balanced area, and so from this perspective the hypotheses was supported.

**Hypothesis Two.** The second hypothesis predicted that treatment families would show a significant increase in communication satisfaction on post-treatment measures. No significant differences were shown between the treatment and control families on pre-test measures, although the results approached significance \( p = .06 \). Some degree of self-selection may have been evident in families between the treatment and control groups. While external reasons were given for selecting the control group (i.e., schedule conflicts), it is possible that other issues (i.e., fear of failing, lack of belief in the family’s ability to change)
were actually involved. Families in the treatment group tended to show greater communication satisfaction before treatment than did families in the control group. Since they were already somewhat satisfied with the family communication, they may have had reason to believe that family communication could become better. Families in the control group may not have had the same level of faith in their ability to improve communication, based on prior experience with their family communication.

As Rogers pointed out in 1961, satisfying communication plays a central role in the development and maintenance of mentally healthy and functional families. To effect a change in communication satisfaction, a change in communication behavior must take place (Hecht, 1978b). Parents and adolescents, in both treatment and control groups, showed the same results as families as a whole. The treatment families spent eight weeks and approximately 14 hours learning about family management and communication. They practiced new types of communication at home and role played during the sessions. As one participant said on the post-test questionnaire, what they liked best about the program was "learning different ways of talking with each other."
90% of the subjects said that things were better at home and 50% said that it was mostly due to the training, while another 40% said it was partly due to the training. One goal of the study was to change communication behavior and, as measured by Hecht's Measure of Communication Satisfaction which showed a significant increase and by the responses on the questionnaires, it appears this goal may have been reached. At least some of the results may have been affected by the subjects' desire to "look good" or to please the researchers.

Hypothesis Three. On pre-treatment measures of the Putnam/Wilson instrument, there were no significant differences between treatment and control families. However, there were some trends. Control families used controlling most, solution orientation second, and nonconfrontation least. Treatment families used solution orientation the most, and controlling more than nonconfrontation only by a slight margin. On post-treatment measures neither the treatment nor the control families showed a significant decrease in use of controlling or nonconfrontation styles; however, the treatment families showed a significant increase in the use of the solution orientation conflict
style. The order with which both treatment and control families preferred using these styles stayed the same from pre- to post-test measures.

In the pre-treatment measures, although not significant, there were some small differences between the treatment and control parents. Nonconfrontation was the style least used by both and at about the same frequency. The treatment parents did not use the control style as often as the control parents, although they did use it slightly more often than nonconfrontation. The control parents used controlling most often and more often than solution orientation. The treatment parents used solution orientation more than any other style. These results are not very surprising for this population. With many areas of their lives feeling out of control, it is not surprising that they would try more to control family problems, than to avoid them.

Control parents showed no post-test changes in their nonconfrontation style usage. They showed a slight decrease in their use of solution orientation, and a slight decrease in their use of control, although control was still the most used style. This would appear to support the research
showing intervention without communication training does not promote significant change (Alexander & Parsons, 1973).

The treatment parents showed a slight decrease in their use of both control and nonconfrontation, and a significant (p = <.05) increase in their use of the solution orientation style. These results would appear to suggest that through communication training the treatment parents were learning more about solution orientation behavior and using it more. They were also still working at decreasing the less effective controlling and nonconfrontation behavior. This would support the literature which shows that communication skills training may change family behavior (Alexander & Parsons, 1973; Emshoff & Blakely, 1983; Patterson & Stouthamer-Loeber, 1984).

Control adolescents' reported behavior conforms to their parents' behavior. These teens reported nonconfrontation as the highest used conflict style. Since their parents used controlling the most, nonconfrontation behavior may have been the best tactic for the teens to use. If they avoided problems, kept quiet and downplayed problems when they did arise, less time might be spent dealing with conflict. However, if the teens also used the controlling
style, then conflicts might escalate into ever more heated and longer arguments. However, controlling behavior was close behind nonconfrontation. Its possible that when avoidance did not work, then meeting head on (i.e., confrontation) was perceived as the next best behavior. While they used nonconfrontation more than their parents, and controlling less than their parents, solution orientation was the least used style. Their parents were more willing to use solution orientation than avoidance. Possibly the parents had less to gain by avoiding. Some of the "anything is better than nothing" attitude may have been present. If the teens perceived their parents as controlling, then solution orientation behavior may have been seen as just another way for parents to get what they wanted.

On post-treatment measures, the control teens showed only a little change in their use of controlling, a slight decrease; a slight increase in their willingness to use solution orientation, and a large jump in their use of nonconfrontation. Nonconfrontation was the most used style by a slightly larger margin than on pre-test measures. Perhaps confrontation appeared to be more risky than nonconfrontation, they may have felt "nothing risked, nothing
lost." Nonconfronting behavior may have resulted in fewer negative consequences than controlling behavior.

During the study, the control families only worked with their probation officers, while treatment families worked with their probation officers and attended communication skills classes. It is possible that the teens in the control group felt outnumbered by adults and the "system." Teens in the treatment group met with other teens during communication training, and were in the position to know that their parents were willing to make changes in the way they communicated. After all, they had volunteered to attend the training sessions. The treatment teens may have felt more hope in the chances for change in the family and their parents willingness to be part of that change. Since treatment teens showed strong trend in the decrease in the use of nonconfrontation and a significant (p = <.05) increase in their use of the solution orientation style, the results seem to substantiate this.

Having the control families work with probation officers, rather than some other form of control, was specifically chosen to help control for the effects of attention (Alexander & Parsons, 1973.) The results of this study
appear to substantiate what Alexander and Parsons (1973) found: focusing on the family with some form of intervention which does not include communication training is insufficient to cause change; however, interventions which focus on changing family communication do cause change.

On pre-treatment measures, the treatment teens also showed a bit more use of solution orientation than other styles. It was their first choice. The second most used style was nonconfrontation, which was a normal response to the parents' use of control as the second most used style. The teens used control least. After communication training the teens showed a significant increase in their use of solution orientation behaviors, and a slight increase in control style, with a strong trend in decreasing nonconfrontation behavior. As the parents used less control, the teens may have felt more willing to address issues, rather than avoid them. In the process of learning that confrontation no longer held the kinds of negative consequences it might have in the past, teens were more confrontational. Sometimes they used the more positive solution orientation style, and other times controlling, but no longer avoiding. This appears to be a healthy step for these adolescents.
In summary, the significant increase in the use of solution orientation was supported. The significant decrease in the use of control or nonconfrontation was not supported, although some change in that direction did appear. Unsatisfactory problem-solving skills in the family have been identified as correlating with delinquent behavior (Patterson & Stouthamer-Loeber, 1984); and the existence of conflict does not differentiate functional families from dysfunctional families, but what behavior is used to resolve conflict does (Galvin & Brommel, 1986). Therefore, from the results of this study, it might be expected that delinquent behavior would decrease, and that the families would use more functional behavior and communication.

This perception was supported by the families' personal observations on the post-session questionnaire. All families in the treatment group reported fewer behavior problems with the teens and higher levels of family functioning. Ninety percent of the treatment subjects reported that things were "better at home" since the program. One participant said, "Learning to communicate helped in finding other solutions to some of the problems we were having." Another said that for the first time their family was experiencing "open, free
communication." Finally, one parent observed that the program was good for their whole family as they had learned a "different way of talking with each other."

Limitations

FACES II. The FACES scale, as originally designed, used the functions of cohesion and adaptability to describe family types. As such, it was an independent variable. In practice it placed each member into a "family type" individually, and then looked at the pattern formed by family members. More functional families were perceived to be those who were in agreement as to where they placed in family types, and that placement was in the balanced area. Less functional families placed in the mid or extreme areas, and/or perceived themselves to be in very different family types.

This study looked at family types as a dependent variable, saying if family communication patterns were changed, then family types would change also. As far as could be determined, this method of analysis had not been done before. Parents and adolescents were analyzed, however, this study also used an aggregate score of parent and adol-
escent and designated that a family score. As far as could be determined, this also had not been done before.

Therefore, interpreting the results was difficult. Families, parents and adolescents were each analyzed. Also, cohesion and adaptability were analyzed first separately, and then together, for placement on the axis. However, there were no prior studies using FACES as a dependent study, therefore there was less background available to help interpret the meaning of the results.

Family Involvement. It was not possible to have every member of each family involved with the training session, or always involved with the probation officers. Based on prior research (Watzlawick, et al., 1967), families are an inseparable whole, and change in one part of the system affects the whole system (Wilmot, 1987). Therefore, having the youth involved with youth court, and the parent who was the primary communicator (based upon self-report and probation officer observation) in the communication training sessions would also have an effect upon the family as a whole, even though the whole family was not there. In this study, treatment families included some with all members involved, and some with primary or only parent, and some with only one
sibling involved. Probation officers did not always have active involvement with all family members in equal amounts, and so there were probably not any significant differences due to this factor. However, this appears to be an area which would warrant further investigation.

Subject Recruitment and Mortality. Although the goal was to have 10 to 15 families in each group, it was only possible to recruit six families (total of 18 subjects) into the treatment group and nine families (total of 22 subjects) into the control group. Treatment and control groups were looked at as families (aggregate of parents and adolescents), then parents and adolescents were looked at as subsets of the whole.

Mortality in this population had been predicted to be high (Goodyear & Rubovits, 1982), which was one reason for the goal to be at least 30 subjects in each group. Reasons for high mortality within the population used included high rate of moving, lack of interest or motivation, and lack of transportation, or no babysitter available (Goodyear & Rubovits, 1982). One family did move out of the area, one family dropped out of the control group when the teen was sentenced to reform school, a family of four dropped out of
the treatment group after the first night, and another attended so sporadically that they did not meet attendance requirements (more on this under attendance) set up in the methodology.

Problems also arose with the post-treatment measures for the control group. Many did not feel any motivation to fill out test measures they had already done once. It was not possible to get them together at one time, and post-treatment measures were filled out over a three week period by having the researcher, assistants, and probation officers take the post-tests to the homes of the control group. This difference in time and setting was bound to have had some impact, and yet these conditions will always exist in the "real world" setting of working with this type of population. While these limitations make research less accurate and more frustrating to complete, they also lend a bit more "reality" to the overall impact of the training because such limitations will always be involved in training programs with this population.

Role Playing. At times it was difficult to engage the subjects in role playing activity. When they were paired up to role play, it was easier for them to get into a con-
versation about the role play, or problems at home, than to do the role play. Others were shy and/or nervous about trying a role play. It was suggested that more time be spent in supportive conversation among the group at the beginning of the session, and that more time be allowed for discussion of role playing in general and the specific one being done that session before subjects attempted the role play. Also, more modeling (acting out a role play) by the leaders up front before the subjects role played may have helped.

Attendance. Mortality rates may be affected by subjects who cease to attend, however there is another issue with attendance. If a subject attends part of the time, is that sufficient? Will they have had the opportunity to learn as much as a subject who attended all of the time? It was felt subjects would not have the opportunity to learn if they were not present, therefore an attendance policy (Chapter III) was built into this study to control for exposure to similar amounts of communication training.

Two subjects were not used in the treatment group, due to lack of attendance. External reasons were provided, i.e., car wouldn't work, spouse was working out of town and
got home too late, child sick, etc. However, transportation could have been provided if a call had been made, and so it appeared that perhaps other issues were involved. Motivation may have been a problem, or fear that they might not do well, or fear that the family would fail, etc. Attendance appears to be an important issue. Requirements made clear up front, and the participants agreeing to attend at least X number of times, should help with this limitation.

**Mother-Father Communication Differences.** Of the six parents in the treatment group, only two were fathers, and of the six parents in the control group, only one was a father. How much of the results of this study were affected by differences in willingness to communicate or change patterns in communication between mothers and fathers is unknown. The lower number of fathers appears to have occurred because of two primary reasons: a) more single parent families were headed by mothers, and b) fathers were initially more guarded and suspicious about joining a communication skills training program. Because there were more single parent families with mothers and because mothers were often the primary communicator in a family, results of this study may have some relevance to these types of family
systems. However, it is not known how this program might have worked had all families been "traditional," that is, with birth mother, birth father and siblings.

Information for Probation Officers

Communication Training. The most obvious implication of this study is what communication skills training may be able to do for families who are in trouble. Dealing with the issues causing conflict in the family is important, but more important is for the family to learn how to deal with the issues. Someone once said if you give a man a fish, you feed him one meal; but if you teach a man to fish, he learns to feed himself for a lifetime. The same may be said here. If you solve a problem for a family, one problem is solved; but if you teach the family how to solve problems, they learn the process of problem solving for their lifetime!

Therefore, it appears worthwhile for communication skills to be taught to troubled families. This may be done in groups as this study was done, or if a group setting is not possible, it may be done on an individual basis.

There are several rationales for using the group. The members provide each other with a support system. Especial-
ly for the adolescents it appears important for them to know that others are in the same situation, and as mentioned earlier, the group eliminates the "outnumbered" feeling with both parents and probation officers being adults. Also, there is the additional influence that an outsider often as. The probation officer necessarily represents the court system, while a communication skills trainer does not. This might allow families to share with the trainer information they may not so readily share with the probation officer.

However, some training is often better than none, and if a communication group may not be available, it appears worthwhile for probation officers to learn communication skills and how to teach them. If the decision should be made to use a group, there are several more minor issues which seem worth reporting here.

Voluntariness. It was decided and discussed in the procedures section that only families volunteering into the program would be used since nonvoluntary participants were already known to not do as well (Baizermain, et al., 1983; DePanfilis, 1982; Gentry et al., 1982). It appears that further discussion of voluntariness would be in order.

In actuality it is not as simple as to volunteer or to
not volunteer. There are degrees of voluntariness. For example, in the youth court situation the parents were not required to participate in this study. It was one of several choices they had with regard to the adolescents probation terms. In that sense, they did volunteer.

One may wonder if, when a probation officer were working with a family on a one to one basis and no communication training group were available, it would be worth the probation officers' time to try and teach communication skills. After all, it is already known that nonvolunteers do not do very well. However, if communication training were presented as one of several choices the family had in working with the probation officer, then the family may choose to "volunteer" into communication training with their officer. From this perspective, voluntariness takes on a wider definition.

Abusive Families. The procedures section makes the point that communication training programs are not effective as the only form of treatment for abusive families (Kemp & Kemp, 1978, 1984). Since this study did not offer therapy or counseling, abusive families were not included. However, since abusive parents make up a large percentage of those families involved with youth court (D. Morgan, personal
communication, January, 1987), it does not seem appropriate to simply dismiss the issue. Depending upon the type and degree of abuse, a communication training program could be of benefit either after or in conjunction with more appropriate therapy/counseling. Further suggestions for including this population are discussed in the directions for future research section.

Training Location. Since many of the subjects came from lower socioeconomic populations, a "nonthreatening" location was desired for conducting the training sessions. The use of county courthouse facilities was rejected as being too "authoritarian," formal and/or threatening. The use of local church buildings was rejected because of possibilities of religious differences causing pre-occupation during the training sessions. For example, a devout catholic might have felt very uncomfortable in a protestant church building. No local community center was available that was central to most of the subjects, or readily available to local bus transportation, etc. Therefore, University classrooms were used. Some concern still existed as to whether this environment would be threatening to those subjects with little formal education. However, none of the
treatment subjects expressed hesitancy with the location, and it's impact, whether positive or negative, is not known.

**Transportation.** In order to maintain attendance of subjects, transportation had to be made available. Some families had a car and were able to attend with no problems. Others, at times, carpooled with other subjects, and the researchers provided rides during the entire series of training sessions for a family who could not have otherwise attended. Although the University was on the bus line, not everyone could afford the bus, and again transportation had to be arranged. It cannot be overemphasized that readily available transportation is an essential requirement for attendance for this type of population (Goodyear & Rubovits, 1982).

**Babysitting.** Although previous research (Goodyear & Rubovits, 1982) indicated that babysitting would be as important as transportation, for this study it was not an issue. However, future studies similar to this should address the issue of babysitting.

**Anecdotal observations.** Families involved with youth court will experience all of the life events which might happen to any family. They will not be in a vacuum, i.e.,
only "research subjects" with no other influences upon them during the research other than the training under study. Since outside influences will always exist, the question does not seem to be how to eliminate these outside elements, but rather how does communication training help consistently, over a variety of groups and locations, in spite of or in addition to all of the other kinds of life events which will be happening to these families. Below are described several examples of the type of existing situation, or events which occurred during the training, that existed for this study.

One of the families was non-traditional as it involved an older sibling with legal custody of a teenage sibling. It had not been possible for the teen involved to work out problems with his/her parents, both of whom were alcoholics. Therefore, there was a high degree of motivation for both of these people to make the current situation work well. This "outside influence" to the study proved beneficial to the subjects.

In another treatment family, the teen had left home during the first week of the training session. However, there continued to be a great deal of communication with the
family. At the beginning of the program the parents goal was for the teen to move back home. However, instead of this occurring, the parents found that their attitudes were changing as they really communicated with and understood their teens feelings and perceptions for the first time. As they heard the mature, long-range plans the teen was making, and saw the teen hold down a full-time work position, as well as attend school full-time, they developed a respect for their child which had not existed before. Although the parents did not like their teen living away from home, they accepted his/her decision. As a result, the family was able to spend quality time together without intense arguing, and make long-range plans.

In some situations it was unknown how much of the reported increase in communication satisfaction occurred because the family actually learned to communicate about problems better, or how much of it resulted from other changes in the family. For example, in another family, about three-fourths of the way through the training sessions, the father moved out. This move meant he spent less time with his family, and therefore, had less time to argue with them. This family reported one of the largest increas-
es in communication satisfaction. They also reported on the post-session questionnaire that the training had improved their ability to communicate to a large extent.

These anecdotes are offered as examples of the continuing influences that real life situations exert on any study. Often, as in these cases, the results tend to be perceived as beneficial.

Contributions and Implications

It would appear from this study that communication skills training may have some impact on family systems. This study showed that even with the limitations of working with families experiencing problems (i.e., involvement with youth court), with different economic and educational levels, and with all of the outside influences which can and did occur, communication training was still perceived by the subjects as having a positive effect upon their families.

In this study communication skills training was used in conjunction with the usual probation officer involvement for the treatment group. The control families had only probation officer involvement. While some changes appeared to be beginning with the control families, no significant communi-
cation changes were measured, as with the treatment families. It would appear that this type of training would make the probation officer's work more effective and would be more rewarding for the families involved.

Whether communication training would be as effective for nonvolunteer families is a question which this study did not explore. Since past studies had shown that voluntariness increases the success of a program, the decision was made to use subjects who volunteered (Baizermain, et al., 1983; DePanfilis, 1982; Gentry, et al., 1982). The results of this study would seem to support the literature which suggests that volunteers will do well. However, degree of voluntariness is a consideration, as mentioned in the information for probation officers section.

In this study, because a university with a communication department was located nearby, graduate student assistance was available to the youth court probation officers with almost no monetary burden on the court budget (some materials were court supplied). However, the degree to which this help is used depends upon the willingness of the probation officers to support this type of program by encouraging families to attend or making attendance part of
probation requirements, if a communication program were chosen. From this study it would seem worthwhile for similar environments (youth courts, youth homes, youth counseling centers, etc.) to investigate the possibility of using appropriate graduate student assistance with communication training programs, when they are available.

Directions for Future Research

There appear to be a number of areas which would seem appropriate for future research. Certainly the issue of voluntariness is a troubling one. While seeking out those families who are willing to volunteer appears to contribute to the success of the training program, the question must be asked, what can be done for families who do not volunteer? Running similar communication programs with nonvolunteering subjects would seem to be an area which merits further investigation. Two groups could be involved, one using volunteer subjects, and the other using nonvolunteer subjects. This type of study could give more information on the influence of voluntariness among nonabusive parents. Perhaps a different perspective on voluntariness might be degrees of voluntariness, or how perceptions of voluntari-
ness might be changed (e.g., making a desired course of action an appealing one of several choices, rather than a requirement).

The issue of abusive families is another area where more research appears warranted. With the increasing awareness of abuse and the extent to which it exists (Kemp & Kemp, 1978, 1984), this is not a population that can be overlooked. More needs to be known about the relationship between communication style, patterns and skills and abuse. Another area which would appear fruitful would be developing instruments for victim detection. Much is known about changes in behavior that occurs in adolescent victims (Kemp & Kemp, 1984) and this information could be used for the basis of instrument formation. The instrument could be tested among adolescent populations where some degree of certainty existed about existence or lack of existence of abuse. Such an instrument could be useful in school, and other, situations to help detect possible victims of abuse.

Another issue which appears to require further information is that of time. Future research which investigates what amount of time is most beneficial for the effects of practice/role playing would be useful. Another area of time
which would appear to be important to probation officers is how utilization of a communication training program would affect time spent per family by the probation officer. If less time were required, perhaps probation officers would have the ability to deal with more families. This appears to be an important issue for probation officers whose case loads continue to increase.

The differences that may or may not exist between how mothers and fathers respond to this type of program is another area which seems ripe for study. New information in this area might help give direction for whether or not it would enhance the program to modify it to accommodate these differences.

Summary

This study asked the question, "Does communication skills training positively effect the communication satisfaction, conflict behavior and the cohesion/adaptability variable of family systems?" There were several answers to this question. Yes, communication satisfaction appeared to be positively effected. Yes, the use of the solution orientation conflict style appeared to increase, yet while there
was a decrease in the nonconfrontation and control styles, it was not significant. Yes, cohesion appeared to be positively effected. However, the results for adaptability did not support the hypothesis and appeared to raise several issues. Treatment families appeared to move into the balanced area of family types.

During the course of this study questions were answered, and new questions appeared. The issues of voluntariness, abusive families, time for training, time efficiency for probation officers, and male-female communication patterns of parents appear important and relevant to the future of communication skills training programs with this type of population. These issues would appear to have much heuristic value, and should provide fertile ground for future research.
REFERENCES


Community boards: Outreach materials and manual, (no date). The Community Board Programs, Inc. San Francisco, California.


APPENDIX A

Circumplex Model
APPENDIX B

Outline of Training Sessions
Outline of Training Session One

A. Introduction

1. Introduction to training
   a. Why parenting today is different than it was for prior generations.
   b. Purpose - to add new skills to your parenting "menu."

b. Overview of Program

1. What skills will be taught
2. How they will be taught - information and activities

C. Pre-Tests

1. Explanation for taking
2. Time to take

D. Conclusion

1. Express appreciation for cooperation
2. Review time and place commitments
Outline of Training Session Two

A. Short Review of Session One

B. Introduction to Session Two
   1. Relationship of stress, feelings and conflict

C. Stress Management
   1. Importance of managing stress
   2. How to manage stress

D. Dealing with anger/feelings
   1. Importance of dealing with feelings
   2. How to deal with feelings

E. Discussion of session focus

F. Homework: Identifying and dealing with feelings
   1. How to do homework
   2. Discussion of homework
Outline of Training Session Three

A. Review of session two

B. Introduction to session three
   1. How we talk affects how we're understood

C. Introducing skills
   1. Clear language
   2. "I" messages

D. Practicing
   1. Exercise for identifying clear language
   2. Exercise for using "I" messages

E. Discussion of session three

F. Homework: using "I" messages
Outline of Session Four

A. Review of session three

B. Introduction to session four
   1. Why continue to practice "I" messages

C. Practicing "I" messages
   1. Role plays practicing "I" messages

D. Discussion of homework

E. Discussion of session focus

F. Homework: continue clear language and "I" messages
Outline of Training Session Five

A. Review of session four

B. Introduction to session five
   1. What is listening, why is it important
   2. What is conflict management

C. Active Listening
   1. How to do it
   2. Practicing active listening

D. Conflict Management
   1. Different ways to manage conflict
   2. The no-lose problem-solving model

E. Discussion of session focus

F. Homework: active listening
Outline of Training Session Six

A. Review session five

B. Introduction to session six
   1. the role of "I" messages and active listening in the no-lose problem-solving model

C. Practicing Active Listening

D. Role playing at problem-solving

E. Discussion of session focus

F. Homework: working on minor risk problems
Outline of Training Session Seven

A. Review session six

B. Introduction to session seven
   1. Why more role playing

C. Discussion of homework

D. Role playing at problem-solving

E. Discussion of session focus

F. Homework: continue problem-solving
Outline of Training Session Eight

A. Review of all prior sessions

B. Debriefing of program
   1. Skills introduced
   2. No-lose problem-solving model

C. Post-tests
   1. Explanation of post-tests
   2. Taking post-tests

D. thank/Appreciation
   1. Resources for further information
   2. Farewell
The sentences below describe ways families may be. Read each one, then use the number in the scale below that represents the word (almost never, once in a while, etc.) you would use to describe how often that sentence applies to your family now.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Almost Never</td>
<td>Once in a While</td>
<td>Sometimes</td>
<td>Frequently</td>
<td>Almost Always</td>
</tr>
</tbody>
</table>

___ 1. Family members are supportive of each other during difficult times.
___ 2. In our family it is easy for everyone to express opinions.
___ 3. It is easier to discuss problems with people outside the family than with other family members.
___ 4. Each family member has input in major family decisions.
___ 5. Our family gathers together in the same room.
___ 6. Children have a say in their discipline.
___ 7. Our family does things together.
___ 8. Family members discuss problems and feel good about the solutions.
___ 9. In our family, everyone goes his/her own way.
___10. We shift household responsibilities from person to person.
___11. Family members know each other’s close friends.
___12. It is hard to know what the rules are in our family.
___13. Family members consult other family members on their decisions.
___14. Family members say what they want.
___15. We have difficulty thinking of things to do as a family.
___16. In solving problems, the children’s suggestions are followed.
___17. Family members feel very close to each other.
___18. Discipline is fair in our family.
___19. Family members feel closer to people outside the family than to other family members.
___20. Our family tries new ways of dealing with problems.
___21. Family members go along with what the family decides to do.
___22. In our family, everyone shares responsibilities.
___23. Family members like to spend their free time with each other.
___24. It is difficult to get a rule changed in our family.
___25. Family members avoid each other at home.
___26. When problems arise, we compromise.
___27. We approve of each other’s friends.
___28. Family members are afraid to say what’s on their minds.
___29. Family members pair up rather than do things as a total family.
___30. Family members share interests/hobbies with each other.
APPENDIX D

Hecht's Communication Satisfaction Scale
This questionnaire is about your reactions to the last time your family tried to solve a problem. Please show how much you agree or disagree that each sentence below describes the conversation you remember. The 4 or middle position on the scale means "undecided" or "neutral." Number 3 is slightly agreeing, 2 is agreeing and 1 is strongly agreeing. Number 5 is slightly disagreeing, 6 is disagreeing and 7 is strongly disagreeing.


1. The other person let me know that I was communicating well.
2. Nothing was accomplished.
3. I would like to have another conversation like that one.
4. The other person genuinely wanted to get to know me.
5. I was very dissatisfied with the conversation.
6. I had something else to do.
7. I felt that during the conversation I was able to present myself as I wanted the other person to see me.
8. The other person showed me that they understood what I said.
9. I was very satisfied with the conversation.
10. The other person expressed a lot of interest in what I had to say.
11. I did NOT enjoy the conversation.
12. The other person did NOT provide support for what they said.
13. I felt I could talk about anything with the other person.
14. We each got to say what we wanted.
15. I felt that we could laugh easily together.
16. The conversation flowed smoothly.
17. The other person changed the topic when their feelings were brought into the conversation.
18. The other person frequently said things which added little to the conversation.
19. We talked about something I was NOT interested in.
APPENDIX E

The Putnam/Wilson Conflict Behavior Scale
For the questions below, think about how you act when a problem or disagreement comes up. DO NOT answer about one recent argument, or a certain time in mind. Try to think about how you are most likely to act. There are no right or wrong answers. Please answer all items using the scale below:

7 6 5 4 3 2 1
Always / Very / Often / Sometimes / Seldom / Very / Never
Often

___ 1. I blend my ideas with others to create new solutions to conflict.

___ 2. I shy away from topics which are sources of disputes.

___ 3. I insist my position be accepted during a conflict.

___ 4. I try to find solutions which combine a variety of viewpoints.

___ 5. I steer clear of disagreeable situations.

___ 6. I give in a little on my ideas when others also give in.


___ 8. I avoid a person I suspect of wanting to discuss a disagreement.

___ 9. I minimize the significance of a conflict.

___10. I build an integrated solution from the issues raised in a dispute.

___11. I stress my point by hitting my fist on the table.

___12. I will go 50-50 to reach a settlement.

___13. I raise my voice when trying to get others to accept my position.


___15. I keep quiet about my views in order to avoid disagreements.

___16. I'm willing to give in a little if the other person will meet me half way.
17. I downplay the importance of a disagreement.
18. I reduce disagreements by making them seem insignificant.
19. I will meet the opposition midway to reach a settlement.
20. I assert my opinion forcefully.
21. I dominate arguments until others accept my position.
22. I encourage working together to create solutions to disagreements.
23. I try to use everyone's ideas to generate solutions to problems.
24. I make trade-offs to reach solutions.
25. I argue insistently for my stance.
26. I withdraw when someone confronts me about a controversial issue.
27. I side-step disagreements when they arise.
28. I try to smooth over disagreements by making them appear unimportant.
29. I insist my position be accepted during a conflict.
30. I take a tough stand refusing to retreat.
31. I settle differences by meeting the other person half way.
32. I am steadfast in my views.
33. I make our differences seem less serious.
34. I hold my tongue rather than argue.
35. I ease conflict by claiming our differences are trivial.
POST-QUESTIONNAIRE

Why are you coming to this program?
Wanted to come _____ Sounded interesting _____
Felt I had to _____ It would be good for my child _____
Other __________________________

Has this program been helpful?
Not really _____ Somewhat _____ A lot _____
A great deal _____ Other __________________________

Have you been involved with counseling during this program?
Yes _____ No _____

Are things better ____ or worse ____ since the program?
Has this been because of this program?
Mostly____ A little____ Some____ None____ Other_______

What did you like best about this program?

What did you like least?

What do you think should stay the same?

What would you change?

Would you recommend a program like this to someone else?

COMMENTS:
APPENDIX G

Release Forms for Treatment and Control Groups
CONSENT FORM

I hereby agree to participate in this research. I understand that the research involves attending parent education classes and filling out a pre and post-questionnaire. The parent education classes will cover developmental information about youth and communication skills training. While this research has been done before, I understand that this is the first time this program has been conducted as part of a youth court referral program.

The questionnaire I fill out will be used for research purposes only and will not be made available to anyone other than the researcher without my written consent. I further understand that at no time will my name be directly associated with the questionnaire, but will be identified by a code number only, for the maintenance of my anonymity.

I have been informed that the parent education classes will present ideas and communication skills which may be new to me, and that some people may feel uncomfortable with these. I have also been informed that similar programs have helped to improve family communication, and this program may help with family communication. Other programs are available within the Missoula area, from time to time, which may provide similar information. P.E.T. (Parent Effectiveness Training) and STEP (Systematic Training for Effective Parenting) are examples of these programs.

I understand that any questions I may have concerning the methods or outcomes of this program will be answered promptly, and are welcomed. I am free to withdraw my consent, and to discontinue participation, at any time.

University Liability Statement: In the event that I am physically injured as a result of this research I should individually seek appropriate medical treatment. If the injury is caused by the negligence of the University or any of its employees I may be entitled to reimbursement or compensation pursuant to the Comprehensive State Insurance Plan established by the Department of Administration under the authority of M.C.A., Title 2, Chapter 9. In the event of a claim for such physical injury, further information may be obtained from University Legal Counsel.

Date

Youth's Signature

Date

Parent's Signature

Date

Researcher's Signature
CONSENT FORM FOR CONTROL GROUP

I hereby agree to participate in this research by completing the questionnaire. The questionnaire I fill out will be used for research purposes only and will not be made available to anyone other than the researcher without my written consent. I further understand that at no time will my name be directly associated with the questionnaire, but will be identified by a code number only, for the maintenance of my anonymity.

I understand that any questions I may have concerning the methods or outcomes of this program will be answered. I may withdraw my consent at any time. I understand that my signature below constitutes my permission to participate, and my permission to use the questionnaire filled out by my son/daughter, also.

_________________________  _________________________
Date                     Parent’s Signature

_________________________  _________________________
Date                     Youth’s Signature

_________________________  _________________________
Date                     Researcher’s Signature
APPENDIX H

IRB Board Proposal
IRB Proposal for Thesis Project

by

Julie Birky-James
Graduate Student
Department of Interpersonal Communication

Prospectus Approved February 2, 1987

____________________________________

Betsy Bach, Ph.D.
Committee Chair
IRB Proposal For Thesis Project

1. The research question for this study is: "Does communication skills training positively affect the communication satisfaction and conflict behavior of family systems?" The purpose of this study is to look at the effect of communication skills training upon parents and youths problem solving behavior. The family will be looked at as a system, that is, change in one part of the system will cause change in all parts of the system (Littlejohn, 1983; Watzlawick, Beavin, & Jackson, 1967; Wilmot, 1983). Families will be referred by youth court probation officers who have worked with an adolescent in that family due to the adolescent’s status offense behavior. Families will be trained in various communication skills (e.g., "I" messages, building self-esteem, clear language, active listening, supportive language, basic No-lose problem-solving model) and will be administered three pre/post test measures. This training will cover a seven week period, tentatively scheduled to begin February 26, on Thursday evenings. The post-test questionnaire will administer the same measures as the pre-test questionnaire to identify change.

2. Learning new communication skills will provide the families referred by Youth Court an opportunity to acquire additional skills to add to their existing inventory of communication skills. These new skills may help them to communicate more clearly (Alexander & Parsons, 1973; Kifer, Lewis, Green & Phillips, 1974) and potentially allow the family to solve problems before coming to the attention of social workers or the court. There exists a large body of research on communication training programs which have occurred outside of the court arena. Many have been used as referral sources for diversion programs, but few have operated within the court system. One of the best which dealt with court referred families was the Alexander and Parsons study of 1973. This program will extend the research of Alexander and Parsons by a) actually operating within the jurisdiction of the Missoula Youth Court, b) covering a wider base of basic communication skills, and c) incorporating role playing and homework for the participants. It is intended to further the knowledge of how well communication training programs will work within the court environment.
3. The subjects will attend a series of seven to nine meetings. There will be one, or occasionally two, meetings a week, on Thursday evenings. The first session and sessions 6-9 will be conducted with both parents and youths together. Sessions 2-5 will be conducted with the youth and parents in separate sessions. While the separate sessions will cover the same information, it will be presented in the manner most appropriate to the age group addressed. Each session will introduce a new communication skill, provide information, and allow for practicing the skill. Questionnaires will be administered during sessions 1 and 9. The questionnaire will include Hecht's Measure of Communication Satisfaction, the Putnam/Wilson Conflict Styles Instrument, FACES II (Family Adaptability/Cohesion Evaluation Scale) and demographic information.

4. The subjects will include youth who are currently working with a youth court probation officer and their parents or guardian. The parents will give permission for the youth to also be in the program. These youth are in the 13-16 age group. Youth court interns will offer them the option of attending this program as part of their probation, but participation will be completely voluntary.

5. Risks or discomforts would only be those normally experienced when exposed to new ideas or skills. The subjects will be given information and an opportunity to practice the new skills, but at no time are they required to accept, believe, or adopt them. There are no penalties or repercussions for not doing well, not participating, or not accepting what is presented. Answers to the questionnaire are voluntary and confidential.

6. Information and communication skills presented will be offered as additional parenting skills which participants may want to try. No one has to accept or try any of the skills. The participants will also be able to provide mutual support to each other, and so, the group will act as a support group as well as a potential learning group.

7. All participants will use first names only in the meetings. The questionnaire will be coded with a number, not a name, so no one will know who filled out which questionnaire. This will be done to maintain confidentiality. Pre-
treatment measures will be compared to post-treatment measures by number, not name.

8. Attached is a copy of the written consent form that is to be signed by each subject.
