

Parent-Child Connectedness: Paving the Way for Parents to Communicate Effectively with their Teens

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Parent-Child Connectedness – A “Super Protector”

As sexuality educators, we are naturally curious about adolescents and sexual risk-taking behavior. We may often ask ourselves, “Why is it that some teens are successful at making responsible decisions about sex (i.e., choosing to postpone sex or choosing to use condoms and contraception if they do have sex), while other teens are not?”

Unfortunately, there is no one definitive answer to this question. Adolescent sexual risk-taking behavior is complex and is influenced by a variety of bio/psycho/social factors.¹ Some of these influences, such as living in poverty, spending time with peers who are having sex, and drinking alcohol in excess, are risk factors. That is, they increase the risk that a teen may engage in undesirable sexual behaviors. Other factors, such as self-efficacy, good academic performance, and greater perceived negative consequences of pregnancy, are protective factors for they have a protective influence on a teen’s sexual decision making. One important factor that has been identified by research over the past decade as potentially playing a “super protective” role in the prevention of teen pregnancy, STD and HIV is *parent-child connectedness* or PCC. In fact, PCC is documented as a protective factor for over 30 different adolescent health outcomes.

ETR’s Parent-Child Connectedness: Bridging Research and Intervention Design (PCC BRIDGE) Project

Given that PCC is so protective, ETR Associates (ETR)² began to ask the question: “What can we do as program developers to support practitioners in implementing activities that strengthen PCC?” In 2003, the Annie E. Casey Foundation³ funded ETR to study PCC with three goals in mind: 1) to better understand how PCC is established and maintained in families, 2) to better understand how it functions as a protective factor, and 3) to identify intervention activities that would strengthen it. This article will summarize some of ETR’s findings as well as make recommendations about how sexuality educators can incorporate PCC into their work.

¹ For more information about risk and protective factors related to adolescent sexual risk-taking, we recommend that you review *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy* by Douglas Kirby, PhD. This report is available from the National Campaign to Prevent Teen Pregnancy at: <https://www.teenpregnancy.org/store/item.asp?productId=151>.

² Education, Training, Research Associates (ETR) is a national non-profit organization established in 1981 in Santa Cruz, CA. The mission of ETR is to enhance the well-being of individuals, families and communities by providing leadership, educational resources, training and research in health promotion with an emphasis on sexuality and health education. For more information about ETR, visit its website at www.etr.org.

³ For more information about the Annie E. Casey Foundation, visit: <http://www.aecf.org/>.

Defining PCC

One of ETR's first tasks during the first months of our study was to find a succinct way to describe the concept of "parent-child connectedness." ETR reviewed over 600 articles related to PCC for a literature review titled: *Parent-Child Connectedness: Implications for Research, Interventions and Positive Impacts on Adolescent Health*.⁴ As a result of this literature review work, our team developed a succinct definition that is now being used more and more by others in our field:

Parent-child connectedness is a condition characterized by the (positive) quality of the emotional bond between parent and child and by the degree to which this bond is both *mutual* and *sustained* over time.

In addition to helping the team develop a definition, the literature review shed light on many other aspects of PCC. Some of the major findings from the literature review phase of our PCC BRIDGE project are listed below.

- PCC is a complex construct with 98 possible determinants (i.e., factors that contribute to PCC and factors that weaken it).
- In order for true connectedness to exist, it must be mutual – that is experienced by both the parent and the child. The fact that both parent and child can contribute to creating and sustaining PCC makes it what we call a *bidirectional* condition.
- Parent-child connectedness develops differently during different developmental stages of a child's life.
- Parents with a strong connection to their children are more likely to see positive results when they model/teach positive behaviors, values and messages. Unfortunately, the effects of connectedness also hold when parents model negative behaviors.
- Parent-child connection comes about as a result of the *act of parenting*, that is *care-giving*, and as such, is not necessarily dependent on the presence of biological parents or a particular family structure, such as the nuclear family.
- Communication (e.g., a topical discussion about sex) and involvement (e.g., attending open-school night) are two important behaviors needed for developing and maintaining parent-child connectedness, but neither behavior alone results in a state of high parent-child connectedness.
- Ecological contexts, such as economics, public policy and neighborhood, have significant effects on families and their ability to promote connectedness. For example, parents coping with poverty are apt to experience more stress and illness. These effects may mean that parents have less time and energy to devote to connecting with their children.

⁴ *Parent-Child Connectedness: Implications for Research, Interventions and Positive Impacts on Adolescent Health* can be downloaded for free from the Resource Center for Adolescent Pregnancy Prevention Website (ReCAPP) at <http://www.etr.org/recapp/research/litreview.pdf>.

- The existing body of academic literature related to PCC is largely focused on white middle class families. Perspectives of economically disadvantaged families and families of color are, for the large part, missing from the literature.

Giving Voice to African American and Latino Families

In 2004, in an attempt to address the absence of information about these families in the literature on PCC, ETR’s project team conducted 16 focus groups with African American and Latino parents and teens (11-15 years) living in low-income neighborhoods in five cities.⁵ Our findings from this focus group study *confirmed* much of what we learned about PCC from our literature review – especially the fact that economically disadvantaged families work long hours, inconvenient shifts and are tired and stressed at the end of day. This tiredness and stress makes it more challenging for parents to connect with their teens. At the completion of this study, ETR had gathered enough data about parent-child connectedness to begin thinking about how to develop strategic intervention activities that can help families maintain or increase PCC.

Designing PCC Intervention Activities

Our team used a program development framework known as the Behavior-Determinant-Intervention (BDI) Logic Model⁶ to apply our newly developed understanding of PCC to the design of intervention activities. In the past, ETR has successfully used the BDI Logic Model to strategically and scientifically design intervention activities that meet a given health goal. There are four sequential steps to completing a BDI Logic Model: 1) establish a health goal; 2) identify behaviors that directly relate to that health goal; 3) identify determinants (i.e., risk and protective factors) of those behaviors; and 4) identify intervention activities that can change those determinants. In the case of ETR’s PCC project, our health goal was “to increase or maintain the condition of parent-teen connectedness in families.” After careful consideration of the multiple sources of information we have gathered over the last three years, our team identified seven behaviors that PARENTS must consistently exhibit in order to establish and maintain connectedness with their teen.⁷ These behaviors include:

- 1) Providing for basic physiological needs (e.g., housing, nutrition, health care, etc.)
- 2) Building and maintaining trust
- 3) Demonstrating love, care and affection
- 4) Sharing in activities with their teens

⁵ A report on the findings from this focus group study titled *Parent-Child Connectedness: Voices of African-American and Latino Parents and Teens* can be downloaded for free from ETR’s ReCAPP website at <http://www.etr.org/recapp/research/PCCFocusGroupReport.pdf>.

⁶ To learn more about BDI Logic Models, see ETR’s BDI Logic Model paper written by Douglas Kirby, PhD on the ReCAPP website at <http://www.etr.org/recapp/BDILOGICMODEL20030924.pdf>. A free online course how to use BDI Logic Models is also available on ReCAPP and can be accessed from the homepage.

⁷ At the current time, this logic model identifies only parent behaviors that lead to parent-child connectedness. At a later time, our team expects to complete another logic model identifying the teen behaviors necessary for establishing and mainlining parent-teen connectedness. We suspect that these behaviors will largely be reciprocal.

- 5) Communicating effectively including the effective giving of receiving and understanding messages
- 6) Preventing, negotiating and resolving conflicts
- 7) Establishing and maintaining structure including: a) establishing expectations, b) monitoring effectively, c) disciplining effectively, and d) providing positive reinforcement

Once these seven behaviors were identified, the team consulted the data again to identify multiple determinants that support each of these parent behaviors, including parent's attitudes/beliefs in the importance of each behavior, the knowledge and skills needed to perform each behavior effectively, parent's awareness of personal issues that may hinder the successful performance of these skills, and the need for a parent to receive support and encouragement.⁸

ETR is moving ahead with the final step in the development of the complete BDI Logic Model, a step which coincides with the ultimate goal of our project: development of intervention activities that will affect the determinants of behaviors, increasing those behaviors, and consequentially increasing PCC itself within families. No intervention could address every determinant associated with each of the seven behaviors due to unavoidable constraints such as: funding limitations, time, staff expertise, and the relative difficulty of changing certain determinants such as poverty, which is a widespread, systemic problem.

We expect to have a small collection of PCC intervention activities by the end of 2005. In the meantime, it is worth examining the determinants that we plan to target in this initial round of intervention development. The particular determinants (listed below) were chosen for the strength of their relationship to PCC, their potential impact on PCC, and their amenability to change given the resources of a typical adolescent reproductive health project.

- 1) **Parents' understanding of adolescent development**, especially in regard to the development of independence and autonomy.
- 2) **Parents' ability to encourage the healthy development of autonomy.**
- 3) **Parent's ability to encourage teens to talk**, share feelings and engage in conversation.
- 4) **Parents' understanding of their parenting style** and how parenting style affects connectedness with teens.
- 5) **Parents' ability to listen actively as a way to build trust** with their teens.
- 6) **Parents' ability to listen actively as a way to provide emotional support** to their teens.
- 7) **Parents' ability to find support** when needed.
- 8) **Parents' skill at providing positive reinforcement** of teens' good behaviors.

⁸ Our logic model is almost 20 pages long, clearly too long to be included in this article. If you are interested in receiving a copy of this logic model, please contact Lori Roller (lorir@etr.org) or Steve Bean (steveb@etr.org).

What Sexuality Educators Can Do.

Sexuality educators are in an excellent position to weave parent-child connectedness into their work because of their regular involvement with parents and teens. Below is a list of recommendations.

- Use ETR’s work on parent-child connectedness to design intervention activities for your local project to increase important parent-behaviors that lead to PCC. Contact ETR for a copy of their logic model to have a better understanding of the determinants of each parent behavior. Apply adult learning principles in the development of these activities.
- Recognize that parent-child connectedness and parent-child communication are not the same thing. Communication is just a part of connectedness.
- Acknowledge that our field does not have a lot of good evaluation data for parent-child communication programs. From the evaluation data that we do have, we know that the evidence is mixed.⁹ One possible explanation to why not all parent-child communication programs work is because parent-child connectedness is low or non-existent in a particular family. Talking to teens about “issues” (e.g. sex or drugs) is more likely to be effective when connectedness is established.
- If your program is already doing, or thinking about doing, parent-child communication work, consider including some activities that address PCC as well. The effect of your work is likely to be amplified by the fact that modeling and messages ‘stick’ better when there is connectedness between parents and teens. Some suggestions include:
 - Using learning activities that encourage participants to empathize with the other’s point of view – fishbowls, role plays, skits, interviews, etc.
 - Offering parent and family skills training — active listening, assertive communication, discipline, conflict negotiation, etc.
 - Including recreational activities that encourage working together and communicating such as sporting events, sit-down dinners, community service projects, etc.
 - Assigning homework to teens that allows them to interview their parents and share their values and opinions.
- Let parents know that they do not have to plan elaborate events to connect with their teens – 5 to 10 minutes of one-on-one time each day can have a powerful effect.
- Attend ETR’s on-day Training Institute on PCC at the Healthy Teen Network Conference¹⁰ in Chicago, IL on November 16, 2005!

For more information about parent-child connectedness, please feel free to contact the co-directors of ETR’s PCC BRIDGE project by email:

Lori Roller at lorir@etr.org or Steve Bean at steveb@etr.org

⁹ *Innovative approaches to increase parent-child communication about sexuality: Their impact and examples from the field.* (2002). New York, NY: Sexuality Information and Education Council of the United States (SIECUS).

¹⁰ For more information about Healthy Teen Network’s 2005 Conference, visit: <http://www.noappp.org/>