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INVESTIGATING POTENTIAL FACTORS THAT INFLUENCE RECRUITMENT FOR PARENTING SKILLS CLASSES

By

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Bachelor of Arts in Psychology University of Nevada, Las Vegas 2004

Master of Arts in Psychology University of Nevada, Las Vegas 2009

A dissertation submitted in partial fulfillment of the requirements for the

Doctor of Philosophy in Psychology

Department of Psychology College of Liberal Arts The Graduate College

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THE GRADUATE COLLEGE

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ABSTRACT

Investigating Potential Factors that Influence Recruitment for Parenting Skills Classes

by

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Juvenile delinquency and child maltreatment are prevalent in the U.S., particularly among ethnic minority children. Although parent skills training is effective in preventing these problems, recruitment and retention rates of parents from ethnic, racial, and socioeconomic minority groups are less than satisfactory. In a qualitative study of 13 high-risk African American mothers, Davis (2009) investigated the deterrents to recruitment and participation for parent skills training programs. The resulting theory, the Mothers Shouldn't Need Help Script, explicates the relationship between the beliefs reported by these mothers and participation in parenting skills classes. To build on these findings, the overarching purpose of this study was to investigate the generalizability of the Mothers Shouldn't Need Help Script (Davis, 2009) in a larger sample of 308 African American and 65 European American mothers. Mothers recruited via a combination of methods completed self-report measures that included demographic information, socioeconomic status (SES), attitudes towards institutional authority (GAIAS: Rigby, 1982), and racial identity attitudes (African American mothers only; CRIS: Worrell, Vandiver, & Cross, 2004) online or via telephone. In addition, mothers completed the Parenting Belief Questionnaire (PBQ), which was developed to measure four constructs

of the Mothers Shouldn't Need Help Script. Multiple regression analyses with the GAIAS and PBQ subscales supported the hypothesized relationships between parenting beliefs as detailed in the *Mothers Shouldn't Need Help Script* for the African American mothers. Specifically, when asked to attend a parenting skills class, stronger beliefs that parenting is an innate ability; parental responsibility for children's misbehavior; and negative attitudes towards authority figures predicted stronger feelings of being accused of being a bad parent. These relationships were not found in the European American sample. Additionally, cluster analysis with the three PBQ constructs and the GAIAS yielded four unique score profiles of response patterns on measures of parenting beliefs (i.e., PBQ/GAIAS groups). Chi-squared analyses indicated that the four PBQ/GAIAS groups differed significantly in regards to African American racial identity attitude profiles (i.e., CRIS cluster membership) and SES group membership among African American mothers; and SES group membership for the combined African American and European American sample. Overall, these findings suggest that interventions to neutralize the beliefs outlined in the *Mothers Shouldn't Need Help Script* may affect African American mothers' reaction to requests to attend parenting skills classes and receptiveness to the skills taught in those classes.

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In addition to their work on this project, I also want to thank Dr. Rennels and Dr. Meana for being incredible role models. I worked closely with Dr. Rennels on her research during both my undergraduate and graduate training and have come to greatly admire her dedication to conducting well-designed research projects that incorporate the highest ethical standards. Dr. Meana is an incredible professor and therapist who has inspired numerous graduate students to strive towards developing the clinical skills she so effortlessly demonstrates. I also admire the high academic standards both of these professors demand of their students.

There are far too many individuals to mention from my personal life who inspired, assisted, or contributed to my development as a person and, subsequently, to the completion of this endeavor. My husband, Eric, deserves my deepest gratitude for his

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DEDICATION

To my grandmother, Dorothy Christman

Thank you for teaching me to love.

I miss you.

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CHAPTER 1

INTRODUCTION

Although appropriate parental involvement is one of the most effective means of preventing and remediating the effects of child maltreatment, juvenile delinguency, and youth violence, many parents find themselves unable to intervene effectively. To aid these parents, psychologists have designed, implemented, and tested the efficacy of various training classes that teach parenting skills (Burns, Howell, Wiig, Augimeri, Welsh, Loeber, & Petechuk, 2003; Centers for Disease control and Prevention, National Center for Injury Prevention and Control [CDCP- NCIPC], 2006; Dembo, Dudell, Livingston, & Schmeidler, 2001; Domitrovich & Greenberg, 2003; Patchin, Huebner, McCluskey, Varano, & Bynum, 2006). Despite the apparent efficacy of these programs, researchers report abysmal recruitment and retention rates for parenting skills classes (August, Realmuto, Hectner, & Bloomquist, 2001; Caspe, Lopez, & Harvard Family Research Project, 2006; Chow, Jaffee, & Snowden, 2003), with exceptionally poor rates among individuals from ethnic minorities (Biglan & Metzler, 1999; Kumpfer, Alvarado, Smith, & Bellamy, 2002; Perrino, Coatsworth, Briones, Pantin, & Szapocznik, 2001; Weinberger, Tublin, Ford, & Feldman, 1990). For example, recruitment and retention rates for families from minority groups may be as low as 10% (Biglan & Metzler, 1999), whereas recruitment rates in general are successful with 20-50% of all families approached (August, Lee, Bloomquist, Realmuto, & Hektner, 2003; Coie, Watt, Hawkins, Ramey, Markman, Long et al., 1991; Coie, Watt, West, Hawkins, Asarnow, Markham et al., 1993; Mrazek & Haggerty, 1994; Weinberger et al., 1990). Furthermore, attrition rates for at-risk families typically range from 29% to 40% (August et al., 2003;

Gottfredson, Kumpfer, Polizzi-Fox, Wilson, Puyear, Beatty, et. al., 2006; Kazdin, Siegel, & Bass, 1992; Lieberman, 1990).

In fact, research indicates that parents from racial and ethnic minority groups are especially reluctant to participate in parenting programs (Kumpfer et al., 2002; Perrino et al., 2001; Weinberger et al., 1990). In particular, African American parents are less likely than Latino or European American parents to participate and be retained in parenting programs for violence prevention (Perrino et al., 2001) and drug prevention (Hahn, 1995). One potential explanation for the low rates of participation and retention in parenting programs is a lack of attention to cultural factors (Forehand & Kotchick, 1996; Gorman & Balter, 1997). Although there are numerous definitions of culture (Whaley & Davis, 2007), here culture is defined as the beliefs, values, traditions, and practices shared by a group of people that are transmitted by direct or indirect methods across generations (López, Grover, Holland, Johnson, Kain, Kanel et al., 1989). Individuals in a culture may share a particular worldview that shapes their perception of the world, their interpretation of events, and imbues meaning in their lives (Hiebert, 2008; Howard, 1991). Culture is dynamic in that some aspects of it may result from, or change due to, specific life experiences and history that are common to a smaller group of individuals within a larger societal context (Guarnaccia & Rodriguez, 1996; Hiebert, 2008). For example, although there is a general shared culture specific to being a U.S. citizen (e.g., an "American"), within the U.S. there are specific groups of people who share specific beliefs, values, traditions, and practices they developed based on historical or personal experiences not common to all U.S. citizens (e.g., African American or Asian American). These experiences may include differential or unequal treatment based on some observable

difference (e.g., language, skin color, religion, sexual preference, age, physical/mental ability, and/or sex) that often lead to a power differential (e.g., political influence, employment, economic, educational attainment, etc.). As such, the term *minority* is often used to describe groups who are disadvantaged by having less power and who, consequently, are the objects of prejudice, oppression, discrimination, or marginalization (VandenBos, 2007, p583). Conversely, the terms *majority* or *dominant* describe the group who benefits from the power differential.

With regard to parenting programs, specifically, culture is a critical construct because parents from racial, ethnic, or socioeconomic minority groups may not fully accept the techniques taught them when those techniques conflict with their belief systems (Davis, 2009). Although there has been some effort to modify existing parent training program interventions, these modifications often consist of superficial changes like using ethnic sounding names in examples or matching the ethnicity of the program personnel to that of the clients (Gorman & Balter, 1997; Parke, 2000). Changes that are more comprehensive include translating programs into the language of the target population, although these changes retain the theoretical underpinnings and content of the original program (Gorman & Balter, 1997). Culturally adapted programs strive to incorporate values and traditions of the target group but contain the same content as the original program and continue to rely heavily on majority culture definitions and theories of what constitutes appropriate parenting (Gorman & Balter, 1997). Despite being potentially beneficial, these cursory changes may fail to address more profound differences between the perspectives of the program designer and the client. The optimal, and rarest, programs are culture-specific programs, which are designed to optimize

parenting practices and be in accord with the group's cultural values and beliefs (Gorman & Balter, 1997).

Despite an increased focus on cultural competence in psychology, parenting research conducted with predominantly European American, middle class populations formed many of the existing theories that underlie current interventions (Forehand & Kotchick, 1996; Gorman & Balter, 1997; Smith, Perou, & Lesesne, 2002). The previous lack of attention to cultural factors is problematic given that an emerging body of research demonstrates that cultural values influence parenting beliefs and practices (Holden & Edwards, 1989, Kazdin, 1985; Ogbu, 1991). Specifically, ethnicity appears to be particularly influential in child-rearing beliefs, values, and practices (Bartz & Levine, 1978; Durrett, O'Bryant, & Pennebaker, 1975; Forehand & Kotchick, 1996; Pagano, Hirsch, Deutsch, & McAdams, 2002; Short & Johnston, 1994). For example, African American families report using more physical discipline than do European American families (Eamon, 2001; Flynn, 1999; Lansford, Deater-Deckard, Dodge, Bates, & Pettit, 2004).

Additionally, the relationship between parenting practices and youth behavior differs by ethnicity. For example, the use of authoritarian parenting styles by Asian American parents did not demonstrate the same negative effect on student grades for Asian American youth as for European American or Hispanic youth (Chao, 2001; Dornbusch, Ritter, Leiderman, & Roberts, 1987). Data from several studies indicate ethnic variations in youth behavior outcomes and the use of corporal punishment (Dearing, 2004; Deater-Deckard, Dodge, Bates, & Pettit, 1996; Deater-Deckard & Dodge, 1997; Eamon, 2001; Lansford et al., 2004). Specifically, the expected relationship

between the use of corporal punishment and negative externalizing behaviors differs among African American, European American (Deater-Deckard et al., 1996; Deater-Deckard & Dodge, 1997; Lansford et al., 2004), and Latino youth (Dearing, 2004; Eamon, 2001). Likewise, differences in parenting style and the subsequent effect on youth vary by ethnicity and neighborhood contextual variables. For example, a more punitive style of parenting has less negative effects on African American males than Latino males living in neighborhoods perceived as dangerous and socially non-supportive and in comparison to youth of both ethnicities living in safe and socially supportive neighborhoods (Kotchick, Dorsey, & Heller, 2005; Roche, Ensminger, & Cherlin, 2007; Simons, Lin, Gordon, Brody, Murry, & Conger, 2002; Taylor, Jacobson, Rodriguez, Dominguez, Cantic, Doney, et. al., 2000).

Given considerable research and clinical evidence highlighting differences in parenting practices across ethnic groups and the fact that the U.S. is highly diverse, it is necessary to incorporate cultural considerations in the design of parent training programs (Forehand & Kotchick, 1996). Currently, ethnic minorities comprise a significant proportion of society in the U.S. (U.S. Census, 2000). Additionally, racial and ethnic minorities are disproportionately represented in the juvenile justice system. For instance, national data from juvenile courts indicate that African American youth are involved in 25-41% of all crimes committed by youth (Puzzanchera & Kang, 2010). This percentage is particularly disturbing considering that African American youth currently only comprise approximately 14.3% of all youth in the U.S. (USDHHS, 2010). Therefore, by not considering and incorporating cultural perspectives, parenting training programs may not meet the needs of a significant proportion of families in the U.S. For example, Davis (2009) conducted a qualitative study using grounded theory methodology to investigate the deterrents to recruitment and participation among a sample of high-risk African American mothers. The results from this study indicated that this sample of mothers endorsed specific parenting beliefs explicated in the *Mothers Shouldn't Need Help Script* (Davis, 2009). The current study investigated these parenting beliefs in a sample of African American and European American mothers.

In addition to ethnicity, another major confounding factor that may influence parenting beliefs is socioeconomic status (SES). To date, relatively little research investigates the influence of SES on parenting in delinquent populations. Parenting practices and youth behaviors are contextually specific. For instance, neighborhood social and physical conditions (e.g., low-income neighborhoods) are important for associations between parenting and youth behavior for African American and Latino American adolescents (Roche, Ensminger, & Cherlin, 2007). For instance, research suggests that less parental control among African American male adolescents results in more profound behavior problems when the youth live in neighborhoods perceived as dangerous (Kotchick et al., 2005; Roche, Ensminger, & Cherlin, 2007; Simons et al., 2002). Furthermore, due to the different stressors they experience, ethnic minority families from lower socioeconomic strata may not respond to currently available treatments in the same manner as do middle class European American families (Dumas & Wahler, 1983; Wahler, 1980; Wahler, Leske, & Rogers, 1978).

In sum, given that parenting programs assist in reducing juvenile delinquency and child maltreatment when used, it is essential that existing programs be culturally competent due to the overwhelming overrepresentation of minority youth among those

affected by these problems. Data from successive censuses from 1960 to 2000 indicate a steady increase in the proportion of the U.S. population that reported membership in a racial and ethnic minority group (Hobbs & Stoops, 2002; U.S. Census, 2000). Other researchers forecast near equal proportions of individuals in minority and European American groups by the mid-21st century (Day, 1996). To support emerging research examining parenting beliefs as they relate to juvenile delinquency and child maltreatment in ethnic minority groups, the overarching purpose of this study is to advance the scientific knowledge about the diversity of parenting beliefs. Specifically, the current study investigated the generalizability of the parenting beliefs found in a high-risk sample of African American mothers by Davis (2009) to a second, larger group of African American and European American women. Given that parent skills training has shown efficacy in preventing child maltreatment and juvenile delinquency, it is anticipated that the information gained form this research will help clinicians and researchers understand the beliefs and needs of African American mothers. This information can be used to conceptualize, develop, and implement culturally competent parenting programs that will be more palatable and potentially more effective than those programs currently available to at-risk mothers.

CHAPTER 2

LITERATURE REVIEW

Section 1: Youth Delinquency and Child Maltreatment

Juvenile delinquency and child maltreatment affect a substantial number of youth in the U.S. today. This section reviews existing data on prevalence rates of various forms of juvenile delinquency, including the disproportionate representation of African American youth in adjudication and incarceration settings. Additionally, this section reviews the prevalence rates of child maltreatment among various racial and ethnic minority groups.

Juvenile Delinquency

Juvenile delinquency is a broad term for illegal antisocial behaviors by a minor that are beyond the control of the parents (Perrino et al., 2001). These acts include offenses involving property (e.g., stealing, vandalism), status offenses (e.g., truancy, running away) and youth violence (Parsons & Alexander, 1973). One particularly problematic form of juvenile delinquency, *youth violence*, involves the intentional use of threatened or actual physical force that results in injury, death, psychological harm, maldevelopment, or deprivation (Mercy, Butchart, Farrington, & Cerdá, 2002). This aggressive behavior includes relatively minor acts like verbal abuse, bullying, hitting, slapping, or fist-fighting as well as more serious violent acts like aggravated assault, robbery, rape, and homicide (CDCP- NCIPC, 2006).

General rates of delinquency suggest that it is an enormous problem in the U.S. For example, there were 1,666,100 cases of delinquency reported in the juvenile justice system in 2007 (Puzzanchera & Kang, 2010). Of these, 409,200 were crimes against a

person (e.g., assault, murder). In 2004, physical fights affected 36% of high school students and there were over 780,000 youth violence-related injuries nationally (Centers for Disease Control and Prevention [CDCP], 2005; CDCP- NCIPC, 2006). In 2003, statistics indicate 5,570 youth between the ages of 10 and 24 were murdered, (CDCP- NCIPC, 2006). Moreover, juvenile delinquency is responsible for increased health-care costs, decreased property values, and disruption of social services, resulting in government expenditures exceeding \$158 billion each year (CDCP- NCIPC, 2006).

Among racial and ethnic minority groups, prevalence rates for juvenile delinquency are even higher than in the general population. In 2007, African American youth represented 33.5% of all cases handled by juvenile courts (Puzzanchera & Kang, 2010). This percent reflects an increase from 24.8% in 1985 and is the highest rate recorded since that date. Furthermore, of the 409,200 crimes committed against a person in 2007, 41% were committed by an African American youth (Puzzanchera & Kang, 2010). Specifically, African American youth committed 30.3% of the 594,500 property crimes committed by youth and 25% of the 190,100 drug related crimes.

Moreover, research indicates that African American youth are disproportionately represented among incarcerated youth. For example, in 2003, African American youth comprised 38% of all youth in residential juvenile placement facilities (Snyder & Sickmund, 2006). Data from 43 states and the District of Columbia indicate that African American youth represent 37% of youth arrested; 56% of youth in secure detention centers; 57% of youth in secure correction facilities; 30% of youth in adult jails; 21% of youth in adult lockups; 51% of youth transferred to adult criminal courts for adjudication; and 43% of youth on probation (Lieber, 2002). In contrast, African American children

only represented between 14.3 and 16% of all youth during the years these data were collected (Lieber, 2002; USDHHS, 2010). Thus, these data indicate that African American youth are arrested, detained, and adjudicated at over twice the rate of their representation in the general youth population.

Child Maltreatment

Child maltreatment is also a considerable problem in the U.S. The Child Abuse Prevention and Treatment Act defines child maltreatment as harm or threat to the health and welfare of a child under the age of 18 due to any physical or mental injury, sexual abuse, or negligence (United States Congress, 2003). Physical abuse includes actions by the child's caregiver such as shaking, slapping, punching, beating, biting, kicking, and burning which result in any non-accidental injury to a child (Oates, 1996). Emotional abuse is the use of criticism, threat, disparagement, or ridicule to harass a child verbally (Oates, 1996). Sexual abuse occurs when youth are coerced or enticed to perform sexual activities, such as physical contact, visual exposure, and exploitative actions like taking pictures. Additionally, sexual abuse also includes voluntary sexual acts by youth who, because of their age and level of maturity, are unable to give informed consent for those activities (Oates, 1996). Whereas abuse is an overt act, neglect is the failure to act by caretakers in providing a child's fundamental needs such as food, clothing, medical care, education, or housing (Oates, 1996).

With regard to child maltreatment, data from 50 U.S. states indicate that 693,174 (9.3 per 1000) children were victims of child maltreatment in 2009 (USDHHS, 2010). Specifically, parents committed 80.9% of the maltreatment and children three years and

under experienced significantly higher rates of maltreatment than children in either the 12-15 or 16-17 age ranges (33.4%, 17.8%, and 6.3%, respectively: USDHHS, 2010).

Ethnic and racial differences in rates of child maltreatment are stark. Data from 48 states indicate that African American youth have the highest rate of child maltreatment victimization, at 15.1 per 1000 of the same race children, followed by children identifying as multi-racial (12.4 per 1000), American Indian/Alaskan Native (11.6 per 1000), Pacific Islander (11.3 per 1000), Hispanic (8.7 per 1000), European American (7.8 per 1000), and Asian American (2.0 per 1000). Furthermore, African American children comprise 22.3 percent of all victims of child maltreatment, despite representing only 14.3 percent of all children in the U.S. during 2009 (USDHHS, 2010). Moreover, African American at almost twice the rate of any other race or ethnicity (i.e., 4.23 per 1000: USDHHS, 2010). These data, similar to those for delinquency, suggest that African American children are disproportionately the victims of child maltreatment.

In addition to suffering from maltreatment and fatality at unduly high rates, Child Protective Services places African American youth in foster care at higher rates than expected. In 2002, for example, 38% of all children in the foster care system nationally were African American (Snyder & Sickmund, 2006). Furthermore, 37% of the children in foster care for whom the courts terminated parental rights were African American (Snyder & Sickmund, 2006).

Section 2: Prevention of Juvenile Delinquency and Maltreatment

As aforementioned, juvenile delinquency and child maltreatment are ubiquitous problems that yield severe consequences for both the youth involved and society in

general. Research supports the presence of risk factors that are common to both problems, particularly among racial and ethnic minorities. Thus, researchers have developed and evaluated prevention and intervention programs to address the risk factors that contribute to these issues. This section reviews the intervention efforts used to prevent or remediate them, which are predominantly based on established risk factors for juvenile delinquency and child maltreatment.

Intervention Efforts

Risk factors. Current theories indicate that there are risk factors common to both child maltreatment and juvenile delinquency. A review of 44 studies indicates a higher risk for child maltreatment and delinquency among children with certain family and community variables (Black, Heyman, & Slep, 2001). Effect sizes among these studies ranged from moderate to large (Black et al., 2001). Family variables included parental drinking, early parenthood, mother's emotional problems such as anxiety, distress, and unhappiness, and parenting or familial stress (Black et al., 2001). Similarly, other research indicates that harsh, inconsistent, or punitive styles of discipline are also risk factors (Black et al., 2001; Domitrovich & Greenberg, 2003). Community variables include living in an impoverished neighborhood (Black et al., 2001). Other recognized risk factors include drug or alcohol use by youth or parents; poor emotional and psychological functioning in the youth or parent; and poor educational functioning in the youth or parent; and poor educational functioning in the youth or parent; and poor educational functioning in the youth or parent (CDCP- NCIPC, 2006).

Moreover, child maltreatment itself and low levels of parental involvement may also be risk factors for juvenile delinquency and violence in addition to the aforementioned risk factors believed to be common to both maltreatment and juvenile

delinquency (CDCP- NCIPC, 2006; CDCP- NCIPC, 2006; Dahlberg & Potter, 2001; Domitrovich & Greenberg, 2003). For example, in their meta-analysis of 66 longitudinal studies Hawkins et al. (2000) describe five domains that predict juvenile violence. Among these domains are family factors, such as poor family management practices, child maltreatment, and low levels of parental involvement (CDCP- NCIPC, 2006; Hawkins et al., 2000).

Numerous intervention programs have been designed to prevent or reduce child maltreatment and juvenile delinquency by focusing on the risk factors common to both. The intervention approach may include individual treatment, group interventions, or school-based programs (Domitrovich & Greenberg, 2003; Howard, Flora, & Griffin, 1999; Lipsey & Wilson, 1998; Reid, Eddy, Fetrow, & Stoolmiller, 1999; Webster-Stratton & Taylor, 2001). These programs may illicit change through intervention with the parents, child, and/or the community (Domitrovich & Greenberg, 2003; Howard et al., 1999; Lipsey & Wilson, 1998; Reid et al., 1999; Webster-Stratton & Taylor, 2001; Vitaro, Brendgen, & Tremblay, 2001). Parent-focused approaches improve parental functioning, parental child-rearing skills, and/or the quality of the parent-child relationship (Domitrovich & Greenberg, 2003). Conversely, *child-focused* interventions focus primarily on reducing children's risk by improving social, emotional, or cognitive skills (Domitrovich & Greenberg, 2003). Finally, multi-component interventions involve both the parent and child and/or school personnel or community members (Domitrovich & Greenberg, 2003). Parent focused interventions are one of the primary intervention strategies as research indicates that they are highly effective. Research supports the efficacy in reducing rates of juvenile delinquency and child maltreatment for many

existing intervention programs (Burns et al., 2003; Hussey, Chang, & Kotch, 2006; Lundahl, Nimer, & Parsons, 2006; Lutzker, 2006; Title V community Prevention Grants Program, 2002; Webster-Stratton & Hammond, 1997; Vitaro et al., 2001).

Parent-based interventions. Although parenting styles can be one significant risk factor in youth delinquency (Domitrovich & Greenberg, 2003), family is the most important factor in bringing these behaviors under control (Mendel, 2000). Accordingly, family interventions are a highly regarded method in preventing or remediating juvenile violence and delinquency issues (Dembo et al., 2001). Research indicates that parent and family-based programs have a positive effect on family relationships, parenting skills, communication skills, and problem solving (CDCP- NCIPC, 2006; Lundahl et al., 2006). For example, in one review of 13 family interventions, Caspe et al. (2006) argued that family strengthening programs yield improvements in children's outcomes through reductions in problematic conduct, aggressive behaviors, substance use, and emotional problems. Furthermore, these programs also increased children's social competency, selfcontrol, and social skills (Caspe et al., 2006). Despite the importance and efficacy of parent involvement in early prevention and initial remediation for the aforementioned problems, parents often find themselves unable to intervene effectively. To assist them, an assortment of training classes have been designed and implemented to teach parents the skills to overcome this obstacle and help their children (Burns et al., 2003; CDCP-NCIPC, 2006; Dembo et al., 2001; Domitrovich & Greenberg, 2003; Patchin et al., 2006).

The extant literature indicates that parent skills classes demonstrate efficacy in preventing child maltreatment (Hussey et al., 2006; Lundahl et al., 2006), juvenile

delinquency (Burns et al., 2003; Coatsworth, Pantin, & Szapocznik, 2002; Dembo et al., 2001; Larzelere & Patterson, 1990; Webster-Stratton & Hammond, 1997), and juvenile violence (Patterson, Chamberlain, & Reid, 1982; Reid et al., 1999; Webster-Stratton & Taylor, 2001). For example, a meta-analysis of 23 studies published between 1970 and 2004 demonstrates the efficacy of parent training interventions designed to prevent child maltreatment (Lundahl et al., 2006). Participants in the studies analyzed included parents thought to be at risk for committing child abuse and individuals with confirmed histories as abusers. The authors used Cohen's d as a measure of effect size for each study and calculated d for the overall general areas measured among the studies. The authors grouped outcome measures used in the studies to reflect general areas of improvement. Parents evidenced moderate positive gains on outcome measures in each general area immediately after receiving parent training interventions: documented abuse (n = 3, n)d=.45), child-rearing behaviors (n = 13, d=.51), parent emotional adjustment (n = 13, d=.51) =.53), and attitudes linked to abuse (n = 11, d =.60). Later follow up information revealed moderate effect sizes were found among studies that assessed long-term childrearing attitudes (n = 6, d = .65) but only small effect sizes were reported for studies that assessed change in child-rearing behaviors (n = 5, d = .32) and emotional adjustment (n =6, d = .28). Unfortunately, the authors did not include information about parent characteristics such as ethnicity in the analysis. It is quite possible that enough of the studies they analyzed did not contain sufficient information to do so.

However, parental attendance appears to affect highly the efficacy of these programs. In a study of the Early Risers Program, parents with high program attendance (minimum 50% of sessions) reported improved use of effective discipline methods and

those with low attendance did not (August et al., 2001). These authors cite extant research supporting the hypothesis that early childhood aggression is a precursor on the pathway to conduct problems later in childhood and even serious anti-social behavior in adulthood. Based on this premise, the authors tested the efficacy of a program using a multi-modal approach (i.e., interventions to improve educational competence, social competence, behavioral self-regulation, and parent investment in child) designed to bolster protective factors that could intervene in this pathway. Study participants included 245 six-year-old children and their parents (124 experimental: 121 control condition). Participants in both conditions were comprised primarily of European American heritage, with 15.3% of the experimental condition and 6.6% of the control condition reporting membership in a nonspecific minority group. Children were screened for aggressive behavior using the Aggression Scale of the CBCL Teacher Report Form at the end of their Kindergarten year. By the end of the two-year intervention, children with the most severe aggression scores on the CBCL demonstrated significant improvement in selfregulation along with decreased aggression, hyperactivity, and impulsivity when controlling for baseline scores. Most importantly, parents who attended more than 50% of the family sessions reported progressive increases in improvement in disciplinary practices over time that reached statistical significance by the end of the program (August et al., 2001). This finding is important because research implicates harsh and inconsistent disciplinary strategies as a risk factor in child maltreatment and juvenile delinquency (Black et al., 2001; Domitrovich & Greenberg, 2003).

Given the research support for the efficacy of parenting programs in reducing youth violence, juvenile delinquency, and child maltreatment, in 2002 the CDC identified

the development and evaluation of parenting intervention programs designed to address these issues as one of its primary research goals (National Center for Injury Prevention and Control, 2002).

Issues with Existing Parenting Programs

As aforementioned, research supports the efficacy of parenting skills programs in addressing the risk factors for child maltreatment and juvenile delinquency. However, attendance is required in order to realize the benefits of these programs. Meeting this requisite is complicated due to poor rates for recruitment and retention for parenting classes (August et al., 2001; August et al., 2003; Caspe et al., 2006; Chow et al., 2003; Coatsworth, Santisteban, McBride, & Szapocznik, 2001; Kumpfer et al., 2002; McCurdy & Daro, 2001). To affect change, even programs based on sound theories and designs must have parents attend and participate (Caspe et al., 2006). Thus, these programs must address issues of recruitment and retention.

Recruitment and retention issues. Research indicates that success rates for recruitment for parenting programs range from 20 to 50% of families contacted (August et al., 2003; Coie et al., 1991; Coie et al., 1993; Mrazek & Haggerty, 1994; Weinberger et al., 1990) with typical rates between 29% and 40% (August et al., 2003; Gottfredson, et. al., 2006; Kazdin et al., 1992; Lieberman, 1990). Furthermore, these rates can be as low as 10% for recruitment and retention of minority families (Biglan & Metzler, 1999). One study of barriers to recruitment found an overall recruitment rate of 31% from the general population of parents; however, these researchers noted that individuals from lower SES strata were underrepresented in their sample (Heinrichs, Bertram, Kuschel, & Hahlweg, 2005). These data indicate a general reluctance by parents to participate in parenting

programs; which is amplified among parents from racial, ethnic, or economic minorities, (Biglan & Metzler, 1999; Kumpfer et al., 2002; Mrazek & Haggerty, 1994; Perrino et al., 2001; Weinberger et al., 1990). Moreover, this reluctance to participate in parenting programs appears to vary among diverse minority groups.

One example of this phenomenon is found in a study on engagement with 143 families (33% African American, 67% Latino) enrolled in a parenting program for violence prevention (Perrino et al., 2001). Results from this study indicate that African American parents were less likely than were Latino parents to engage in the program (43.6% versus 80.2%, respectively). Given that child maltreatment and juvenile delinquency are problems that occur at disproportionately high rates among African American families from lower socioeconomic (SES) classes (Dembo, Pacheco, Schmeidler, Ramirez-Garmica, Guida, & Rahman, 1998; USDHHS, 2006; Webster-Stratton & Hammond, 1997), the lack of attendance and efficacy of existing parenting programs is particularly problematic. Likewise, in another study, African American parents were less likely than were Caucasian parents to participate in a parenting program for drug prevention (Hahn, 1995).

In addition to poor rates for recruitment when working with at-risk youth and their families, program attrition rates can range as high as 50-75% (Sexton & Alexander, 2004). As demonstrated in the aforementioned discussion of August et al. (2001), many programs fail to achieve their objectives because the parents do not attend sessions often enough to achieve maximum program benefits. Furthermore, although they did not report specific statistics, the authors reported that parents that self-identified as a member of an ethnic group dropped out of the program at significantly higher rates than parents who

self-identified as European- American (August et al., 2001). Similarly, high program attrition can lead to cessation of the program, as was found in a second evaluation of the Early Risers Program when insufficient parent enrollment forced researchers to eliminate the parent-training component completely (August et al., 2003).

Efforts to improve recruitment and retention. Problems with recruitment and retention continue despite extensive efforts by researchers to increase participation in parenting skills classes. Researchers in one study developed an intensive process in which they targeted barriers to recruitment by using in-person home visits from neighborhood members, providing the community with numerous information sessions about the classes, and holding meetings in neighborhood schools (Dumka, Garza, Roosa, & Stoerzinger, 1997). Other recruitment strategies involved including some cultural perspectives in the intervention, using auxiliary personnel from the community who shared demographic characteristics with participants and who attended cultural sensitivity training. Retention strategies included using program facilitators who were bilingual and skilled in working with similar groups, holding classes in neighborhood schools only once a week, offering prizes for classes that had the highest attendance, and providing transportation, childcare, and meals for participants and their families. Even with these large-scale efforts to recruit and retain participants, only 70% of the 156 families contacted for recruitment enrolled in the program and only 48% attended more than half of the 8 sessions offered (Dumka et al., 1997). These attendance rates are less-than-ideal given the effort expended.

Section 3: Cultural Competency in Parenting Programs

There has been an increased focus on cultural competence in the field of psychology (Gorman & Balter, 1997). This section reviews the importance of this movement in regards to parent training classes. Additionally, this section provides an overview of current efforts to incorporate cultural competency in existing programs.

Significance of Cultural Competency

A lack of attention to cultural factors, such as ethnicity or SES, may be one reason for the aforementioned low rates for recruitment and participation in parenting programs (Forehand & Kotchick, 1996; Gorman & Balter, 1997). Research supports the importance of considering and modifying parent training programs to include other contextual variables like family structure and parental psychopathology (Emery & Forehand, 1996), maternal depression, divorce, and negative life events (Forehand & Wierson, 1993; Patterson,Capaldi, & Bank, 1991). However, the extant literature on parent training fails to address cultural problems sufficiently or to include diverse minority cultures consistently in their studies (Forehand & Kotchick, 1996). For example, research indicates that the existing programs may not adequately address the competencies and difficulties specific to low SES African American families (Chow et al., 2003; Gorman & Balter, 1997; Parke, 2000).

Significance of Cultural Factors in Forming Theory

Historically, research done with predominantly middle class, European American populations is the source of the existing theories that serve as the foundation for current parenting skills programs (Forehand & Kotchick, 1996; Gorman & Balter, 1997; Hanson & Lynch, 2000; Smith et al., 2002). These programs, based on predominantly European American perspectives, may be ineffective and unappealing to racial and ethnic minorities (Gorman & Balter, 1997; Hanson & Lynch, 2000). For example, one potential explanation for the less-than-ideal recruitment and retention rates found by Dumka et al., (1997) is that, despite incorporating some culturally competent components, the core components of the intervention were based on Eurocentric beliefs and values. Indeed, some of the initial components of the program introduced focused on disciplinary practices, which may have conflicted with the beliefs of the participants. For instance, these disciplinary approaches prohibited corporal punishment based on research outcomes from studies with predominantly middle class European American families that indicated its negative effects on children (Cryan, 1987; Domitrovich & Greenberg, 2003; Flynn, 1999; Heffer & Kelley, 1987; McCown, Driscoll, & Roop, 1996; Pinderhughes, Dodge, Bates, Pettit, & Zelli, 2000).

Corporal punishment is a highly culturally relevant subject for the targeted population in the study by Dumka et al., (1997), as families with similar demographic characteristics (i.e., racial, ethnic and SES minorities) believe in its efficacy (Pinderhughes et al., 2000). This belief often continues despite attempts to teach parents alternate discipline techniques. For example, despite an initial denial of use of corporal punishment or the belief in its efficacy, Davis's (2009) study indicated there were conditions under which African American mothers report they would revert to using corporal punishment instead of alternate methods they learned in parenting classes. This finding is consistent with research that indicates African American parents (Ferrari, 2002; Pinderhughes et al., 2000). Moreover, research with African American families indicates

a potential protective factor for children in the use of corporal punishment (Deater-Deckard et al., 1996; Deater-Deckard & Dodge, 1997; Lansford et al., 2004). For instance, in one study corporal punishment positively correlated with teacher and peer ratings of child externalizing and aggressive behaviors only for European American children (Deater-Deckard et al., 1996). However, there was a negative correlation found for African American children, even when controlling for SES, marital status of mother, and child gender (Deater-Deckard et al., 1996). The authors posited that Baumrind's (1971) theory of authoritarian parenting, including the use of corporal punishment, as eliciting negative outcomes may not be universal to all racial and ethnic minority groups (Deater-Deckard et al., 1996). Although there may be more effective disciplinary strategies, the families in the study by Dumka et al. (1997) may have found the intervention unacceptable as it conflicted with their beliefs.

The design of the Family Empowerment Intervention provides another example of this potential disparity between perspectives (Dembo et al., 2001). This intervention is based on four theoretical approaches: systemic, structural, transgenerational, and psychoeducational. According to information on counseling culturally diverse groups (Sue & Sue, 2003), the structural theory approach, in which parents are at the top of an invariable hierarchy and set boundaries for other family members, is potentially insensitive to the beliefs of some minority groups. For example, in the worldview of Native Americans no family member holds a dominant position; rather, they endorse a system of respect for elders that includes cooperation among family members and autonomy in decisions (Herring, 1999). Similarly, among the strengths of African American families is the ability to adopt multiple roles within the family (Sue & Sue,

2003). Thus, members of some minority groups could find the hierarchical power structure offensive or irrelevant.

As discussed above, parenting skills programs generally demonstrate efficacy in reducing juvenile delinquency, child maltreatment, and improving outcomes for children when attended (Burns et al., 2003; Dembo et al., 2001; Hussey et al., 2006; Larzelere & Patterson, 1990; Patterson et al., 1982; Reid et al., 1999; Webster-Stratton & Hammond, 1997; Webster-Stratton & Taylor, 2001). Presumably, parents must also accept and use the techniques taught them in order to benefit from attending the program (Hanson & Lynch, 2000; Heffer & Kelley, 1987). However, when these techniques conflict with their belief systems parents may not employ the technique, as was disclosed by one sample of African American mothers recovering from drug addiction (Davis, 2009). These mothers discussed how, even when reunification with their children in part depended on attending parenting classes, they had difficulty accepting and using parenting techniques that conflicted with their deeply held beliefs (Davis, 2009). Thus, the palatability of programs may influence the acceptance and use of the skills taught, which, in turn, may influence treatment outcomes.

Treatment Outcomes Appear to Differ by Ethnicity and SES

Qualitative studies indicate that culture affects perception of treatment and treatment outcome (Lokken & Twohey, 2004; Pope-Davis, Toporek, Ortega-Villablobos, Ligiero, Brittan-Powell, Jiu et al., 2002). Members of racial and ethnic minority groups access mental health care services at lower rates than do members of the dominant culture (U.S. Department of Health and Human Services [USDHHS], 2001; Chow et al., 2003). Additionally, individuals from several groups tend to seek services for mental health issues from sources other than mental healthcare professionals (USDHHS, 2001). For instance, African Americans and Latinos tend to seek mental healthcare from primary care physicians whereas Native American and Alaskan natives are more likely to seek out traditional healers (USDHHS, 2001). Moreover, individuals from racial and ethnic minorities are more likely to wait until their symptoms have become severe enough to require emergency services before seeking treatment (USDHHS, 2001).

Likewise, treatment may be less effective for these individuals than for those in the dominant culture (Heffer & Kelley, 1987; Kohn, Oden, Munoz, Robinson, & Leavitt, 2002). For example, comparison of traditional cognitive behavioral treatment (CBT) for depression and a culturally adapted CBT treatment resulted in minimal post-treatment differences for a sample of low-income African American women (Kohn et al., 2002). In this study, women in the traditional CBT control condition averaged post treatment depression scores of 24.4 whereas women in the experimental culturally adapted condition on average scored 21.8 points on the Beck Depression Inventory (BDI). Potential scores on the BDI range from 0-63, with scores of 17-21 indicating borderline clinical depression, 21-30 moderate depression, 31-40 severe depression, and over 40 extreme depression. In contrast, one meta-analysis of treatment outcomes among primarily white, middle class populations demonstrated typical BDI post-treatment scores of 12 (Nietzel, Russell, Hemmings, & Gretter, 1987). Similarly, use of CBT with a sample of individuals with low SES yielded post treatment BDI scores of 18 (Organista, Munoz, & Gonzalez, 1994).

Socioeconomic disadvantage is an important predictor of treatment outcome. For instance, in a sample of 101 mothers who completed a parent training intervention to help

them with their child diagnosed with conduct problems, SES, and marital status (single/married) were negatively correlated with mothers' verbal criticism and negative physical behaviors with their children immediately post-treatment and at a 1-year followup (Webster-Stratton & Hammond, 1990). Similarly, in sample of 67 mothers of children with oppositional behaviors in a parenting training program, findings indicate that socioeconomic disadvantage and/or social isolation predicted treatment failure (Dumas & Wahler, 1983). Likewise, parenting skills training programs result in less successful treatment outcomes for parents from lower SES strata (Clark & Baker, 1983; Firestone & Witt, 1982; Wahler, 1980; Webster-Stratton, 1985). Some researchers hypothesize that ethnic minority families from lower SES strata may not respond to currently available treatments in the same manner as do middle class European American families because they experience different stressors (Dumas & Wahler, 1983; Wahler, 1980; Wahler et al., 1978). Furthermore, parents with low SES have higher rates of terminating training programs early (Clark & Baker, 1983; Dumas & Wahler, 1983).

Increasing Need for Cultural Competency

Statistics indicate an ongoing increase in the proportion of individuals in the U.S. that self-identify as a member of a racial or ethnic minority group. For example, from 1960 to 1970 the number of individuals' identifying as a member of a minority group increased by 0.9%, from 1970 to 1980 by 4.4%, and from 1990 to 2000 by 5.2% (Hobbs & Stoops, 2002). In the 2000 census, 24.9% of U.S. citizens self-identified as a member of an ethnic minority (U.S. Census, 2000). Of these, approximately 12.3% identified as African-American, 12.5% Hispanic or Latino of any race, 0.9% as American Indian or Alaskan Native, 3.6% as Asian American, 0.1 as Native Hawaiian or Pacific Islander,

5.5% as Some Other Race, and 2.2% as two or more races (U.S. Census, 2000). These data indicate that racial and ethnic minorities currently comprise a significant proportion of society in the U.S. Furthermore, the government estimated that individuals from minority groups would comprise approximately 47% of the population by 2050 (Day, 1996). Not only is there a pressing need for culturally competent programs currently, this need is undoubtedly going to increase in the future with the growing proportion of racial and ethnic minorities in the population. Thus, given the current high rates of juvenile delinquency and child maltreatment among racial and ethnic minorities, it is imperative that parenting training programs be culturally competent.

Current Efforts to Include Cultural Factors

Efforts to make parent training programs more culturally competent range from superficial changes like using ethnic sounding names or matching personnel and client ethnicity to developing culture-specific programs (Gorman & Balter, 1997; Parke, 2000). Despite some potential benefit, the more cursory changes may fail to address more profound differences between majority and minority cultures. Similarly, there are drawbacks inherent in each of the three main ways that program designers attempt to integrate multicultural factors in their design (Gorman & Balter, 1997).

Translated programs are traditional programs that increase accessibility of the program by translating the program into another language (Gorman & Balter, 1997). This approach does not change the cultural sensitivity of the program content. Culturally adapted programs retain all of the core content as a traditionally Eurocentric program, although they include some cultural perspectives or values of the target population (Gorman & Balter, 1997). The previous discussion of the Dumka et al., (1997) study

illustrates some problems inherent in this type of program wherein parents are either reluctant to participate or do not participate fully due, potentially, to differences in cultural beliefs. The rarest programs are those that are culture-specific, that is, designed to help in successful parenting from within a group's culture, (Gorman & Balter, 1997).

Unfortunately, few parent-training programs discussed in the literature integrate multicultural perspectives in their designs (Gorman & Balter, 1997; Long, 1997). Indeed, many programs commonly used with populations of ethnic or racial minorities are not culturally competent. For instance, the comparison of two prominent parenting programs (i.e., Systematic Training for Effective Parenting [STEP] and Parent Effectiveness Training [PET]) in one review found both programs were Eurocentric and culturally insensitive as they used two parent families with adequate education and finances as exemplary models (Gorman & Balter, 1997). Furthermore, the goal of most programs is to improve deficits in parenting, whereas culturally competent programs view differing parenting beliefs as differences that may or may not be effective rather than as deficits (Gorman & Balter, 1997).

The scarcity of culture-specific programs may explain, in part, the underutilization of the mental health care system by racial and ethnic minorities in comparison to European Americans. For example, in one study that compared mental health care utilization in urban poverty areas, researchers found that individuals from racial and ethnic minorities were likely to postpone seeking services for mental health issues. These individuals waited until their problems required emergency mental health care to seek services rather than seek standard outpatient services earlier (Chow et al., 2003). Moreover, there was further disparity among groups in history of receiving mental

health services and in rates of severe mental illnesses (Chow et al., 2003). Specifically, Asian Americans who sought emergency services were less likely to have had prior mental health care and had higher rates of severe mental illness, particularly diagnoses of schizophrenia, than did Whites, Blacks, or Hispanics (Chow et al., 2003). Additionally, African Americans and Latino Americans were more likely to be referred for services by law enforcement agencies and less likely to be self, family, or friend referred (Chow et al., 2003). Interestingly, those who self-referred were more likely to seek out ethnic specific agencies (Chow et al., 2003). Similarly, one study of 235 low-income parents of children age 5 to 9 years who were primarily African American (57.9%) found that African American parents had significantly higher expectations that mental healthcare providers would be untrustworthy, disrespectful, and provide poor care than did European American parents (Richardson, 2001). These findings suggest possible reasons for the underutilization of mental healthcare services by African Americans, and indeed the general reluctance of other racial and ethnic minorities in utilizing European American based services.

Whereas the use of culturally insensitive interventions may inhibit recruitment and retention and damage the therapeutic relationship with parents, the use of adaptive culturally competent interventions may encourage participation and build rapport. For instance, by not mandating traditional European American values and beliefs, Lieberman et al. (1989: cited in Lieberman, 1990) found that they had a significantly lower attrition rate for their Infant-Parent Program (i.e., 18% versus 40%) than found in similar traditional programs. Program personnel helped parents enhance quality of the motherinfant attachment in an at-risk immigrant Latina population by focusing on understanding

the subjective experience of the participants and their beliefs. Program personnel then helped the mothers incorporate more adaptive skills in their repertoire of parenting techniques in order to realize their maternal goals in accordance with their cultural beliefs.

Cultural Competency Needs

Despite the increased focus on multicultural issues in psychology, there remains a paucity of interventions designed to prevent child maltreatment and juvenile delinquency that effectively target racial, ethnic, and socioeconomic minorities in the extant literature. This deficit in effective interventions is particularly problematic for the racial, ethnic, and SES minority youth who disproportionately suffer from these problems and whose numbers are projected to increase radically over the next several decades (Day, 1996). Moreover, research indicates that the intensive efforts to recruit and retain parents in interventions are ineffective (Dumka et al., 1997). This situation may be due, in part, to the ongoing use of Eurocentric values and beliefs and a deficit in programs based on theories that these groups find culturally congruent. This situation is particularly problematic given the increasing body of research that indicates that cultural beliefs and values influence parenting practices and child outcomes (Holden & Edwards, 1989; Kazdin, 1985; Ogbu, 1991). It is therefore imperative to identify and incorporate these beliefs in future interventions. Indeed, a number of researchers have noted the need for culturally competent interventions (Duhaney, 2000; Kumpfer et al., 2002; Lutzker, 2006; Rodney, Johnson & Srivastava, 2005; Short & Johnston, 1994).

Section 4: Racial, Ethnic, and Socioeconomic Differences in Parenting Beliefs

Parenting beliefs and practices affect parent child interactions, youth outcomes, and are important factors in preventing child maltreatment and juvenile delinquency. Cultural factors, such as membership in an ethnic or socioeconomic minority, can affect parenting beliefs and practices. Thus, these factors are important to consider when designing parenting interventions (e.g., parenting skills programs). This section reviews existing data on variations in parenting beliefs and practices based on ethnicity and SES.

Variation in Parenting Beliefs and Practices by Race and Ethnicity

Parenting beliefs and practices differ substantially across cultural groups (Forehand & Kotchick, 1996). African American parents report that they have different concerns about parenting than do European American parents (Boyd-Franklin, 1989). For example, African American mothers tend to have positive views of education; however, they are less likely than are European American parents to expect their children to go beyond a high school education (Stevenson, Chen & Utall, 1990). Similarly, African American parents endorse having concerns that their children will face oppression, racism, prejudice, and poor school achievement (Boyd-Franklin, 1989). These concerns potentially affect parenting behaviors. In particular, Davis (2009) theorized that these concerns result in a view of the world as dangerous by African American mothers, who then may endorse the use of a power differential as a necessary means to protect their children. Hence, parents as "the boss" must enforce, sometimes with harsh measures, strict rules, and limits in order to keep their children safe (Davis, 2009; Deater-Deckard et al., 1996; Willis, 1992). Indeed, the extant literature elucidates a number of studies on parental disciplinary beliefs and practices.

For example, in a study of 150 non-traditional college students, Ferrari (2002) found differences among parents of Hispanic, African American, and European American descent in parental nurturing behaviors and the use of verbal and physical punishment. The Nurturance Scale from Block's (1981) Child-Rearing Practices Report measured nurturing behaviors, with high scores indicating high levels of warmth and support toward children. In this study, African-American parents endorsed higher nurturing behaviors and higher rates of using both verbal and physical punishment than did Hispanic or European American parents. Hispanic parents reported using more verbal punishment than did European American parents.

A number of other studies indicate that African American parents report using more physical discipline than do European American parents (Ferrari, 2002; Flynn, 1999; Jambunathan, Burts, & Pierce, 2000; Lansford et al., 2004). Furthermore, the outcomes of the increased use of physical punishment appear to differ by ethnicity. Research based on community samples, for example, has shown that corporal punishment is associated with problem behaviors among European American but not African American adolescents (Deater-Deckard et al., 1996; Deater-Deckard & Dodge, 1997). Data indicate that this inverse correlation applies to 3rd grade children (Deater-Deckard et al., 1996) and not only continues through 11th grade but is more consistent in adolescence than childhood (Lansford et al., 2004). Indeed, levels of externalizing behaviors negatively correlated with physical discipline among African American adolescents even when controlling for parental marital status, SES, and child temperament (Lansford et al., 2004). Similar research indicates a negative correlation between corporal punishment and

fighting in school for African American children versus a positive relationship for European American children in elementary school (Gunnoe & Mariner, 1997).

The relationship between physical discipline and externalizing behaviors differs among groups and between research studies. For instance, research with one sample of preadolescent youth has shown modestly stronger associations between corporal punishment and youth behavior problems for White and Latino compared to African American youth (Eamon, 2001). Other research indicates a less steep association between corporal punishment and youth behavior problems for African American and Latino than for European American youth (Grogan-Kaylor, 2005). It is important to note that these data only apply to sub-abuse levels of corporal punishment and that research overwhelmingly supports negative psychological, behavioral, and academic outcomes for children abused during the first five years of life (Lansford et al., 2004). Furthermore, for this sample, African American children had a stronger positive correlation between the relationship for abusive levels of physical punishment and negative outcomes than did European American children (Lansford et al., 2004).

Several researchers suggest that the aforementioned differences in the relationship between corporeal punishment and externalizing behaviors may be due to the motives that youth attribute to their parents' disciplinary strategies (Deater-Deckard et al., 1996; Lansford et al., 2004; Gunnoe & Mariner, 1997). Specifically, European American youth may perceive physical discipline as an" act of interpersonal aggression" whereas African American youth may perceive it as a "legitimate expression of parental authority" (Gunnoe & Mariner, 1997, p. 768). Similarly, the use of high nurturing behaviors may buffer the use of physical discipline by African American parents (Ferrari, 2002). These

authors posit that the paring of warmth and support with the physical discipline may partially explain the differential effects of the use of corporal punishment on children's externalizing and aggressive behaviors observed in Deater-Deckard et al., (1996) study (Ferrari, 2002). Likewise, differences in parenting style and the subsequent effect on youth vary by contextual variables such that a more punitive style of parenting has less negative effects on African American males living in neighborhoods perceived as dangerous and socially non-supportive (Roche, Ensminger, & Cherlin, 2007: Simons et al., 2002).

One study of 841 families from economically disadvantaged neighborhoods investigated the mediating role of community variables (e.g., perceived danger, prevalence of corporal punishment) on the relationships between corporal punishment and conduct problems (Simons et al., 2002). Results indicated a small positive association of parental reports of the frequency and severity of corporal punishment with child self-reported conduct problems. However, this relationship was only significant in neighborhoods in which corporal punishment was used rarely; whereas there was no correlation between the factors in neighborhoods in which corporal punishment was prevalent (Simons et al., 2002). Thus, it would appear that children's perception of corporal punishment (based on the acceptability of its use in the community) might mediate the positive relationship between corporal punishment and conduct problems that is noted in the literature.

This perception may also potentially explain the different outcomes for African American youth supported by some studies (e.g., Deater-Deckard et al., 1996; Deater-Deckard & Dodge, 1997). Interestingly, although there was a negative relationship

between level of parental control and children's conduct problems, this relationship was not as strong in neighborhoods perceived as dangerous (Simons et al., 2002). In this study, parental control was defined as parental knowledge of child's actions, consistency in discipline across incidents, use of inductive reasoning and positive reinforcement. These results suggest that typical approaches to parental control are less effective in neighborhoods perceived as more dangerous (Simons et al., 2002). Therefore, for some populations it may be essential to investigate and promote more adaptive parenting methods that may be outside of the techniques commonly acceptable in more Eurocentric based parenting skills programs.

Variation in Parenting Beliefs and Practices by SES

SES also influences parenting beliefs and styles. For instance, in poor urban areas parents are concerned about their children's safety, gang involvement, drug and alcohol use whereas those in more affluent suburban areas consider peer pressure and the development of a healthy racial identity as more pressing concerns (Boyd-Franklin, 1989). Contrary to commonly accepted belief, among a sample of African American mothers, economic disadvantage and parenting perceptions of mothers contribute more to parenting stress than single parent status or family structure (Cain, 2005).

Indeed, perceptions of the acceptability of disciplinary practices by African American and European American parents vary by both ethnicity and SES (Heffer & Kelley, 1987). In this study, a non-clinical sample of 83 mothers of children between the ages of 2 and 12 years rated the acceptability of five different disciplinary approaches: positive reinforcement, response cost (e.g., removal of privileges), time out, spanking, and medication for a child with oppositional and aggressive behaviors. When the

researcher provided parents from low and middle-upper income families with five behavioral modification options, ratings of the acceptability of medication use to control child misbehavior was higher for low-income parents than middle to upper income parents, independent of ethnicity (Heffer & Kelley, 1987). Results indicated that fewer African American parents with low income rated positive reinforcement as a moderately acceptable disciplinary practice than did European American and more affluent African American parents. Similarly, African American parents with low income rated time out as less acceptable than did more affluent African American parents. More low-income African-and European American parents and middle to upper income African American parents rated spanking as an acceptable practice than did middle to upper income European American parents. In general, parents from all groups rated the use of response cost as acceptable. These authors hypothesized that factors associated with limited financial and personal resources may cause low-income parents to find behavioral modifications which provide more immediate results most acceptable.

In a similar study with 585 families, parents with lower SES endorsed the use of harsher discipline practices (particularly spanking). Moreover, the authors found a positive correlation between parental stress and negative perceptions of their child (Pinderhughes et al., 2000). This relationship was significantly weaker for middle class than for lower SES African American parents. The authors hypothesized that economic advantage may limit the effect of stressors, thereby attenuating differences in discipline responses, and thus serve as a buffer against the impact of stress on parenting.

Economic disadvantage itself also affects parenting beliefs and practices. Stressful neighborhood contextual factors, such as poverty and high crime rates, weaken the

positive correlation between social support and mothers' nurturing parenting behaviors (Ceballo & McLoyd, 2002). Similarly, poverty is associated with diminished parental warmth and support (McLoyd, 1990). Mother's rating of neighborhood quality was negatively associated with mothers' sense of parental efficacy and positively correlated with use of psychological control (Ceballo & Hurd, 2008; Taylor, et. al., 2000).

SES is also correlated with other parenting behaviors, such as how mothers talk to their children (Callahan & Eyberg, 2010). In one study, researchers investigated the relationship between two common methods of measuring SES and parenting behaviors observed in a clinical sample of 89 mothers of 3- to 6-year-olds referred for treatment of oppositional defiant disorder (Callahan & Eyberg, 2010). The children were predominantly male (75%) and fairly representative of the population (i.e., 74% Caucasian, 9% African American, 5% Hispanic, 1% Asian, and 11% Biracial). Observers measured two types of parenting behaviors, prosocial talk, and negative talk, using the Dyadic Parent-Child Interaction Coding System (DPICS). Data indicated that SES, as measured by the Hollingshead Four-Factor Index of Social Status and measures of family income, parent education, and parent occupation, was positively correlated with maternal prosocial talk.

Research generally suggests a negative correlation between economic disadvantage and juvenile delinquency (Larzelere & Patterson, 1990). However, the effects of low SES on delinquency in a longitudinal study of 206 fourth grade boys from a high crime working-to-lower class neighborhood were mediated entirely by parental management. Specifically, parental monitoring and discipline accounted for 46% of the variance in delinquency. Parental monitoring included parents' knowledge of where and

what the child was doing, holding the child accountable to his parents for his actions, appropriate communication, and time spent with the child. Disciplinary practices which were negatively correlated with delinquency included being consistent in applying consequences, parental control of their own anger, and use of reasoning (Larzelere & Patterson, 1990). These data indicate that improvements in parenting skills in these areas, which are typically addressed in parenting skills training, may be effective in remediating the effects of SES on children's delinquency.

Socioeconomic Status (SES). Researchers typically conceptualize socioeconomic status (SES) as a psychosocial variable that indicates a hierarchical standing in a society, which results in differential access to resources, opportunity, and prestige (Duncan & Magnuson, 2003; Mirowsky & Ross, 2003; Rindfleisch, Burroughs, & Denton, 1997; Twenge & Campbell, 2002). Levels of education, occupational prestige, income, and/or wealth are common indicators of SES (Rindfleisch, et al., 1997: Twenge & Campbell, 2002). The effects of SES may be intergenerational (Duncan & Magnuson, 2003; Klebanov & Crane, 1998; Phillips, Brooks-Gunn, Duncan, Klebanov, & Crane, 1998). There is considerable debate in the literature regarding the measurement of socioeconomic status (Cirino, Chin, Sevcik, Wolf, Lovett, & Morris, 2002; Duncan & Magnuson, 2003). Historically, composite measures of social status, such as educational attainment and occupational prestige, have served as a proxy for SES (Barratt, 2006). Alternately, some researchers have used a single measure of income to indicate SES (Duncan & Magnuson, 2003).

In their review, Duncan and Magnuson, 2003 discussed significant problems inherent in the use of any single proxy or composite. For instance, the authors noted there

are problems in making an assumption about positive correlations between education and income, as even college graduates may be poor. Similarly, and particularly relevant in today's economy, there are growing disparities between level of education, occupation, and income. Thus, these authors recommended a more thorough investigation of all four indicators: educational attainment, occupational prestige, income, and perceived wealth, when attempting to determine SES.

Section 5: Differences in Beliefs and Behaviors by Racial and Ethnic Identity

Undoubtedly, there are individual differences in attitudes, beliefs, and behaviors among members of any group (Sue & Sue, 2003). Thus, assuming a standardized treatment approach for all clients from a specific group is stereotyping and potentially a disservice to the client. Individuals from minority groups often feel strong pressure to adopt the ways of the majority culture and tend to do so to varying degrees (Sue & Sue, 2003). Research indicates that the influence of the majority culture on a minority individual's racial or ethnic identity can influence parenting beliefs (Ceballo & Hurd, 2008; Thomas, 2000), preference in therapist ethnicity (Abreu & Gabarain, 2000; Coleman, Wampold, & Casali, 1995; Parham & Helms, 1981), and reaction to therapy (Sue & Sue, 2003). In addition to the aforementioned variations in beliefs, practices, and outcomes based on ethnicity, yet another area to consider is the degree to which parents identify with the majority culture and the effect their racial or ethnic identity has on treatment preferences and outcomes. Several scholars have developed models to explain variations in racial and ethnic identities for African Americans (Cross, 1991), Asian Americans (Maykowvich, 1973; Sue & Sue, 1972), and Latinos (Ruiz, 1990; D30).

Cross's Stages of Black Identity Development

One of the most widely known of these models is Cross's (1991) revised theory of psychological nigrescence: the process by which African Americans move from identifying with a Eurocentric to a more Afrocentric perspective. Cross detailed four potential stages of identity formation among African Americans: Pre-encounter, Encounter, Immersion-Emersion, and Internalization (Cross, 1991). A brief summary of each stage from Cross's (1991) model is presented below.

Pre-encounter stage. Individuals in the first, Pre-encounter stage tend to ignore or devalue race. Individuals in this stage may report that race has little salience for them. Indeed, their perspective on race may range from identifying strongly with a Eurocentric identity, being "race neutral", or even holding anti-Black attitudes. Some have a strong desire to assimilate into the majority culture to the extent that they devalue being African American in favor of European American values, actions, and culture; whereas others may have a strong aversion to other African Americans due to negative, racist stereotypes. For some, being African American may only be associated with a need to disconfirm the negative social stigma of being African American. Individuals in this stage are often miseducated about the positive aspects and role of Africa in the development of world culture, the strengths and historical significance of contributions of African Americans, and the current breadth of abilities and talents among African Americans. Thus, they often devalue their cultural legacy and adopt the perspective that all things "good" or "better" come from the European American culture.

Encounter stage. The Encounter stage is the point when a person in the comfort of his or her Pre-encounter worldview begins to question that view. This process may be

triggered by a sudden, racist encounter that disturbs the "race neutral" perspective previously held. Positive interactions with African Americans who are in other stages of identity formation and who provide information about a positive Afrocentric perspective may also trigger the process. It may occur slowly over time as the person matures and realizes that he or she has missed something in life. Regardless of the type of encounter, the individual is often greatly disturbed or distraught that he or she has held an ignorant, inaccurate, or damaging perspective about being African American. Subsequently, the emotional reaction the person experiences propels the individual toward nigrescence, the process of growth and change by which the person adopts a more positive Afrocentric identity.

Immersion-Emersion stage. The Immersion-Emersion stage is an intense period of transition during which the person commits to developing his or her new Afrocentric identity. The previous identity is deconstructed, denied, and disappears; however, the person has not yet fully developed or understood the new identity toward which he or she is moving. During this process the person often strongly detests the previous views and resents those perceived as the genesis of them (i.e., European Americans) to the point of demonizing all things Eurocentric. The Immersion phase of Immersion-Emersion stage often results in a seriously dichotomized perspective represented by intense hatred of European Americans and a strong desire to associate with the new identity to the point where he or she holds an unrealistic view of all things Afrocentric as superior and completely immerses him or herself in them.

As the person enters the Emersion phase he or she realizes the complexity and begins to perceive being Afrocentric in a more holistic, balanced manner that leads to the

next stage of nigrescence. The individual begins to incorporate a deeper investigation of, commitment to, and understanding of his or her new identity. It is important to note that neither progression through this stage nor entrance to the next stage is assured. Some individuals become perpetually immured in this stage or may even regress to some variant of the Pre-encounter stage.

Internalization stage. In this stage the individuals internalize a stable Afrocentric identity. Often, race becomes highly salient; however, the degree of salience may vary. For some, race becomes the singular focus as they strongly identify with the Afrocentric perspective, often to the exclusion and renunciation of any other perspective. These individuals focus on race with the same intense focus as they did in the Immersion-Emersion stage and may advocate for a more isolationist perspective. Other individuals in this stage may adopt a bicultural or multicultural perspective in which being African American is only one aspect of their identity. These individuals may reach out, or "bridge", to mainstream European American culture or other racial or ethnic minorities to establish or reestablish interactions that they curtailed while in the Immersion-Emersion stage. Generally, this bridging does not reduce, inhibit, or restrict their new identity as an African American as similar activities may have when they were in the Pre-encounter stage. Rather, it adds diversity to their interactions in which they can express or share this new Afrocentric identity.

This new Afrocentric identity protects the individual from psychological insults due to racism as he or she can acknowledge the existence of racism and that anyone may be subject to it. Yet the individual has adaptive ego defenses against racism and is often able to see the full complexity of the events without a distorted filter. Furthermore, the

Afrocentric identity provides a sense of belonging and a comfortable state from which to operate in the world. The individual feels calmer, more relaxed with his or her own identity, develops pride in the African American heritage and culture when in this identity stage. Furthermore, the individual accepts him-or herself as a member of that culture and feels deeply connected to the African American community.

For many in the Internalization stage, the uncontrolled rage they experienced in the Immersion-Emersion stage towards whites is transformed into a controlled anger at oppression and oppressive systems. They experience less dichotomous thinking (i.e., everything European American as "bad" and everything African as the only "good") and develop a more complex and sophisticated perspective on Afrocentrism. It is important to note that this transformation is relevant only to the reference group orientation and worldview whereas personality characteristics remain stable. During this stage some individuals develop a commitment to and sustained interest in the African American community. Some theorists in the field (e.g., Thomas A. Parham) have suggested that the process of nigrescence may be cyclical for some individuals who initially complete it early in life. Specifically, events that occur as a person matures may trigger another Encounter stage, which then leads to a further refining of what being African American means to that person. This process may only entail a brief refocusing or progress to a full reenactment of Encounter, Immersion-Emersion, and Internalization stages.

Expansion of Cross's Theory. While in the process of developing a scale to measure the stages of nigrescence, Cross further expanded his theory in 2001 to include multiple identities within each theme (Cross & Vandiver, 2001). Further validation of the Cross Racial Identity Scale (CRIS) led to the current model which measures six identity

attitudes distributed over three of the four themes (Vandiver, Cross, Worrell, & Fhagen-Smith, 2002). In expanded version, the Pre-Encounter theme is further subdivided into Assimilation, Miseducation, and Self-Hatred identities. Those with an Assimilation identity typically have a Eurocentric worldview as discussed in the revised model. Individuals with a Miseducation identity adopt general negative stereotypes about the African American community as a result of an inaccurate and incomplete education about the roles of Africa and African Americans historically. It is important to note that the negative stereotypes held by these individuals reflect a negative reference group orientation, that is, they are not necessarily internalized and adopted as defining the individual identity but that of African Americans in general. In contrast, individuals with a Self-Hatred identity have internalized these negative stereotypes and dislike themselves, sometimes intensely.

The one Immersion-Emersion theme measured by the CRIS currently reflects the strong Anti-White perspective discussed in the revised model. Finally, Cross subdivided the Internalization scheme into Afrocentricity and Multiculturalist Inclusive identities. Individuals with an Afrocentricity identity have internalized a strong positive primarily Afrocentric perspective. In contrast, individuals with a Multiculturist Inclusive identity internalize a positive Afrocentric identity while not only remaining open to interactions with other groups but also internalizing other aspects of their identity (e.g., nationality, gender, religious, sexual orientation, etc.)

Research Support

Based on Cross, 1991's model, parents who endorsed attitudes consistent with the pre-encounter stage were more likely to engage Eurocentric parenting practices than to

endorse Afrocentric parenting beliefs (Thomas, 2000). In a survey study of 104 African American parents, researchers found correlations between Cross's stages of nigrescence, as measured by the Racial Identity Attitude Scale (RIAS: Parham & Helms, 1981), and a number of child-rearing beliefs specific to African Americans as measured by the Black Parental Attitudes scale (BPA: Johnson, 1980). Results indicated positive correlations between attitudes consistent with Encounter, Internalization, and Immersion stages with the Cleanliness, Family ties, Obedience, and Religion scales of the BPA. However, attitudes consistent with the Immersion stage negatively correlated with the Independence scale, whereas Internalization attitudes positively correlated with the Independence scale. The study was limited in that the majority of the respondents were middle class and all were recruited via their religious affiliation (Thomas, 2000). These results indicate that among African American parents, parenting beliefs can vary by stage of racial identification. Furthermore, at least among middle class African Americans, parents may hold very different parenting beliefs depending on stage of racial identification. Similarly, level of acculturation was related to parental sense of self-efficacy and use of psychological control strategies among a sample of 54 Latina mothers (Ceballo & Hurd, 2008).

Section 6: The Mothers Shouldn't Need Help Script

Little is known about the parenting beliefs, values, and struggles that may deter low-income parents from racial and ethnic minorities from participating in parenting skills classes. To investigate these issues, the primary researcher conducted a qualitative study with a sample of low-income African American mothers using Glasser and Strauss's (1967) grounded theory methodology (Davis, 2009). This section contains a

discussion of the resulting theory, the *Mothers Shouldn't Need Help Script*, which explicates the relationship between the beliefs reported by these mothers and participation in parenting skills classes.

Activation of the Mothers Shouldn't Need Help Script

Participants in this sample were 13 African American mothers in an inpatient substance abuse rehabilitation program (Davis, 2009). Mothers participated in a semistructured interview on their parenting beliefs and perception of parenting skills classes. These mothers reported that they perceived children as basically good and that children's misbehavior is due to environmental factors, such as inappropriate parenting. Thus, the mothers perceived themselves at fault when children misbehaved or when they needed help with parenting skills. Moreover, these mothers believed that parenting does not require didactic instruction, that parenting is an innate ability. Hence, mothers who need help learning parenting skills or who cannot manage their children can feel they are somehow lacking as parents. These beliefs can create mental discomfort for mothers, who may then avoid admitting to others or themselves that they need help learning how to raise their children. Thus, not only are these mothers often reluctant to seek out services on their own, when approached by parenting program recruiters they may feel accused of poor parenting.

These mothers often also had a history of negative interactions with authority figures (Davis, 2009). In addition to having difficulty with authority figures, these mothers often reported having particular difficulty when those individuals held entitled or patronizing attitudes. It is possible that these attitudes towards authority may be due, in part, to the history of oppression experienced by African Americans (Mays, 1986). As

Child Protective Services or family court may have mandated these parents to take parenting classes, they may have felt coerced into attending by an authority figure that is perpetuating the oppression of African Americans. This complex interplay of belief in children's innate goodness, parental responsibility for children's behavior, guilt over a perceived deficit in what they believe is an inherent ability, and resistance to authority results in the mothers' subsequent feelings of being accused of poor parenting and comprises the *Mothers Shouldn't Need Help Script* (Davis, 2009). Activation of this script results in an immediate refusal or reluctance to participate in parenting skills classes when approached for recruitment and/or a resistance to the ideas taught in the class if attendance is mandated.

What is more, these mothers often are mandated to participate in parenting classes as part of their rehabilitation or as a condition for reunification with their children. Thus, acceptance of requests to participate in parenting classes that they feel compelled to accept has serious implications for their potential acceptance and use of parenting skills taught in those classes, particularly if those skills conflict with their cultural beliefs.

Congruent with the aforementioned discussion on racial identity stage, these mothers self-reported several perspectives associated with the various stages of Cross's (1995) model of nigrescence (Davis, 2009). Although parenting beliefs seemed to vary by the degree to which parents reported identifying with Eurocentric or Afrocentric perspective, analysis of the relationship between racial identity stages and parenting beliefs was not possible due to small sample size and lack of objective measurement of either variable. It is possible, however, that the racial or ethnic identity of an individual may influence that individuals' willingness to listen to or accept information presented by

program recruiters or facilitators from same or different cultures. Alternately, more salient factors in this resistance may be SES or struggles inherent in recovery from addiction.

Section 7: The Current Study

Study Objectives

As explicated in this review, parenting skills classes are an effective approach in the prevention of child maltreatment and juvenile delinquency. Unfortunately, recruitment and retention rates are dismally low for the low income, racial and ethnic minority parents whose children are at high risk for these ubiquitous problems. One potential explanation for this phenomenon is that the existing programs, which are predominantly based on Eurocentric theories (e.g., Dembo et al., 2001; Dumka et al., 1997), are culturally insensitive and may be offensive to the intended participants. Furthermore, there is a paucity of culture-specific programs despite evidence of significant variability in parenting beliefs and practices among cultures. Additionally, research supports variability in outcomes by culture and SES, yet it would appear that even within these groups there may be significant variation based on the level of integration of majority cultural ideals. Unfortunately, the extant literature is devoid of specific inquiry about the parenting beliefs, values, and struggles that may contribute to the underutilization of these programs.

Given that parent skills training has shown efficacy in preventing child maltreatment and juvenile delinquency, it is anticipated that culturally competent parenting programs will be more palatable and potentially more effective than those programs currently available to at-risk mothers. Mothers are often the targeted population

for parenting programs, as they tend to be the primary caregivers of children (Dumka et al., 1997). Furthermore, in 2009 (USDHHS, 2010), mothers overwhelmingly represented the largest percent of people committing child maltreatment (61.2%) in comparison to fathers (37.5%). These statistics indicate that recruiting mothers to participate in parenting classes would potentially provide optimal benefit for children. Thus, participants in the current study were mothers who were at least 18 years of age.

Although the *Mothers Shouldn't Need Help Script* derives from research with a sample of African American mothers, it is possible these beliefs are primarily associated with SES. Thus, the script may apply to mothers with low SES regardless of race or ethnicity. Additionally, within African American mothers, the mothers' racial identity attitudes may influence parenting beliefs. Furthermore, it is possible that the script will also apply to mothers of European American decent. These variations in beliefs, whether by race, ethnicity, SES, or racial identity attitudes, may also influence the perception of parenting programs and the willingness of mothers to participate in those programs. Hence, it is important to investigate whether the beliefs within the *Mothers Shouldn't Need Help Script* apply to both European American and African American mothers from diverse socioeconomic statuses.

Thus, the overarching purpose of this study was to investigate the relationships between ethnicity, SES, racial identity attitudes, and parenting beliefs in a sample of African American and European American/White mothers. Specifically, the primary research objective was to investigate whether parenting beliefs vary by race/ethnicity, racial identity attitudes, and SES. Based on the *Mothers Shouldn't Need Help Script* (Davis, 2009), the specific parenting beliefs examined were beliefs about children's

nature (e.g., "good" or "bad"); whether the parent is responsible for how children behave; whether parenting is an innate ability; how needing help with parenting is perceived; and parental attitudes toward authority figures.

Hypotheses

The following three research questions and seven hypotheses explored the primary objective:

Research Question 1: Do parenting beliefs outlined in the *Mothers Shouldn't Need Help Script* as developed by Davis (2009) hold true in a second, larger, more diverse sample of African American mothers?

Hypothesis 1: Consistent with the *Mothers Shouldn't Need Help Script*, I predicted that a second sample of African American mothers would endorse similar beliefs about how the relationship between children's nature (e.g., "good" or "bad"); levels of parental responsibility for children's behavior; beliefs about parenting as an innate ability; and problems with authority figures together predict attitudes about how needing parenting help is perceived.

Research Question 2: Within African American mothers, do parenting beliefs (i.e., about children's nature, parenting as an innate ability, levels of parental responsibility for children's behavior, attitudes about how needing parenting help is perceived, and problems with authority figures) differ by racial identity attitudes and/or SES?

Hypothesis 2a: Among African American mothers, I hypothesized that patterns of parenting beliefs would differ by racial identity such that two or more groups would emerge based on self-reported African American racial identity attitudes.

Hypothesis 2b: Among African American mothers, I predicted that patterns of parenting beliefs would differ by SES such that two or more groups would emerge based on SES.

Hypothesis 2c: Among African American mothers, I hypothesized that patterns of parenting beliefs would differ by a combination of racial identity and SES (i.e., a racial identity X SES interaction) such that two or more groups would emerge based on self-reported African American racial identity attitudes and level of SES.

Research Question 3: Do parenting beliefs (i.e., about children's nature, parenting as an innate ability, levels of parental responsibility for children's behavior, attitudes about how needing parenting help is perceived, and problems with authority figures) differ by race/ethnicity (i.e., self-identification as African American or European American) and/or SES?

Hypothesis 3a: With regard to race/ethnicity, I hypothesized that African American and European American mothers would have different patterns of parenting beliefs. Specifically, patterns of responses on measures of parenting beliefs would predict group membership based on race/ethnicity.

Hypothesis 3b: With regard to SES, I predicted that patterns of responses on measures of parenting beliefs for the combined sample of African American and European American mothers would predict group membership based on SES. I hypothesized that patterns of parenting beliefs would define two or more groups that were distinct in regard to members' level of SES.

Hypothesis 3c: Finally, I hypothesized that there would be a race by SES interaction such that patterns of parenting beliefs would define three or more groups that were distinctly different in regard to members' race/ethnicity and level of SES.

CHAPTER 3

METHODS

Section 1: Participants

Altogether, 679 women consented to participate in this study. Participants selfidentified as one or more of the following: African American (n = 423), Black (n = 151), European American (n = 96), African (n = 43), Spanish/Hispanic/Latino (n = 14), Middle Eastern American (n = 6), West Indian/Caribbean (n = 6), Asian American (n = 5), Pacific Islander (n = 4), Native American (n = 4), and Other (n = 3). Of these participants, data were deleted for the following reasons: not completing all study measures (n = 184); not self-identifying as African American/Black or European American/White (n = 43); missing a data point (n = 20); or not having a child under 18 years old (n = 16). Furthermore, multivariate outliers were determined using Squared Mahalanobis Distance to the Centroid (Hair et al., 1995). Outliers were evaluated and data deleted for those that reflected response biases (e.g., responding *Strongly Agree* to all questions) or reporting conflicting information (e.g., an elementary school education and an occupation as a doctor/professor). On this basis, data for an additional 43 participants were deleted: Parenting Beliefs Questionnaire (PBQ: n = 12), Generalized Attitudes towards Institutional Authority Scale (GAIAS: n = 18), SES (n = 2) and Cross Racial Identity Scale (CRIS: n = 11). Consequently, a total of 373 mothers of children age birth to 18 years old (African Americans n = 308; European Americans n = 65) were retained for the analyses.

Retained participants ranged in age from 18 to 62 years old (M = 37.52, SD = 9.83) and had between one and nine children (M = 2.33, SD = 1.43), with children's ages

ranging from newborn to 42 years old (M= 11.27, SD = 6.46). Participants reported that all of their children lived with them (n = 286), some of their children lived with them (n = 73), or none of their children lived with them (n = 14). With regard to relationship status, participants were married (n = 163); single, never married (n = 87); in a committed relationship (n = 59); divorced (n = 46); widowed (n = 10); and other (n = 8). With regard to generational status, the majority of participants reported being fifth generation or greater (n = 289), followed by fourth (n = 58), third (n =16), first (n = 6), and second (n = 4).

Section 2: Measures

Demographics

A demographic form was used to collect information regarding mothers' age, ethnicity, race, relationship status, number and ages of children, and mothers' generational status in the U.S. (see Appendix I).

Parenting Measure

Parenting Beliefs Questionnaire. An extensive review of the extant literature revealed that there is no unitary measure of parenting beliefs as depicted in the *Mothers Shouldn't Need Help Script*. Thus, to provide quantitative support for the theory, I identified specific measurable constructs contained in the theory, determined how each construct would be measured, then developed survey items to measure each construct as needed. This process is outlined below.

Constructs identified. First, I reviewed the qualitative study by Davis (2009) and, specifically, the *Mothers Shouldn't Need Help Script* for general areas of parenting beliefs previously endorsed by African American mothers in the *Mothers Shouldn't Need*

Help Script. These general areas included (a) beliefs about children's nature (e.g., "good" or "bad"); (b) whether the parent is responsible for how children behave; (c) whether parenting is an innate ability; (d) parental problems with authority (i.e., institutional authority: police, courts, and teachers); and (e) how needing help with parenting is perceived.

The extant literature and available measures of parenting beliefs were reviewed for items to address each area. Adequate measures of attitudes towards institutional authority (i.e., police, laws/courts, teachers, and military) and of ethnic identification were found and thus were not developed. No existing measures were found for any of the other potential influences or parental beliefs. Therefore, items to measure these areas were developed.

Item development. Items were generated using a three-step procedure. First, the constructs for measurement were clarified according to the *Mothers Shouldn't Need Help Script* (see Table 1, Appendix II). Then a review of the literature indicated an appropriate level of measurement, response format, and item generation process (DeVellis, 2003; Schweigert, 1998). Likert-type scales are a commonly used response format to assess attitudes in survey measures (Allen & Seaman, 2007; DeVellis, 2003). The use of Likert scales presumes that the underlying variable in continuous and thus, at minimum, an interval level scale (Clason & Dormody, 1994). Interval level data allow the most flexibility in analytical approaches (DeVellis, 2003; Schweigert, 1998). Considerable debate exists over the use of Likert-type items as continuous variables in analyses (e.g., Knapp, 1990). Despite this debate, researchers in the social sciences generally accept the

use of Likert items in summative scales as continuous variables in parametric analyses (Allen & Seaman, 2007: Clason & Dormody, 1994; Labovitz, 1967).

Numerous researchers debate the optimal number of response options when designing scales (Dawes, 2008; Preston & Colman, 2000). A larger number of response options allow for greater variability in scores; however, participants may not be able to make meaningful discriminations between responses when provided a large number of response options (DeVellis, 2003). Moreover, research indicates that respondents tend to use more points on a scale as the number of response options increase, thus items with ten scale points generate greater discrimination in responses than items with five or seven scale points (Dawes, 2008). However, internal consistency and reliability decrease when the number of scale points exceeds ten (Preston & Colman, 2000). When considering internal consistency, reliability, discriminant validity, and respondent preferences research indicates that seven, nine, or ten point scales are preferable (Preston & Colman, 2000). Some scale designers prefer the odd number of response options to allow for a middle neutral point (DeVellis, 2003). Given this information, I chose to use nine point Likert scales (where 1 = Strongly Disagree, 5 = Neither Agree nor Disagree, and 9 = Strongly Agree).

A pool of 40 questions distributed over four constructs were generated. Experts in the areas of survey development (N = 2: one doctoral and one masters-level researcher) and teaching parenting skills (N = 3: one doctoral and two masters-level clinicians) reviewed the items for clarity and face validity. These experts rated each item on a 7point Likert scale. Scores for each item were averaged and the top six items were selected for inclusion in the scale (see Table 1, Appendix II, for items and scores). The final

measure was named the Parenting Beliefs Questionnaire (PBQ) and contained 24 items (see Appendix III).

PCA of the Parenting Beliefs Questionnaire. The use of all 24 PBQ items as variables lacks parsimony and presents difficulties in the planned analyses. Therefore, it was decided to conduct a principal components analysis (PCA) to (1) determine the underlying factor structure; (2) develop reliable subscales that provide useful information about the constructs of interest; and (3) reduce the number of variables for analysis (Fabrigar, Wegener, MacCallum, & Strahan, 1999). First, to facilitate interpretation, responses for negatively keyed items on the PBQ were reversed. Data were prepared for analysis by investigating skew and kurtosis for normality. All items on the measure exhibited an acceptable distribution.

Group differences. The Bartlett-Box procedure indicated significant group differences in the variance-covariance matrices for the 24-item PBQ between African American and European American mothers (Box's M = 493.08, p = <.001). These results suggested that separate PCA's should be conducted for each group; however, it was not feasible to analyze the groups separately given the relatively small number of European American participants (n = 65). Therefore, I decided to conduct the PCA with the combined sample. The data for each group was mean-deviated prior to performing the PCA as a test of Between-Subjects Effects indicated a significant difference between group means of African American and European American mothers, F(1) = 9638.90, p = .001. Following completion of the PCA, the means for each subscale were calculated using raw scores in order to maintain the ability to investigate group differences in subsequent analyses.

Item analysis. Analysis of individual item means and standard deviations for each group (i.e., African American and European American) indicated means varied from 2.56 to 7.28 for African Americans and from 2.94 to 7.08 for European Americans, with no extremes in means and acceptable variance for both groups (see Table 2, Appendix II, for items and scores). Similarly, all inter-item correlations were less than .7, indicating no problems with multicollinearity. In contrast, analysis of mean-deviated scores for the combined sample yielded three items with negative corrected item-total correlations and six items with corrected item-total correlations < .1. As negative correlations, or near zero correlations, indicate that an item may be problematic and need to be revised or discarded (Hogarty, Hines, Kromrey, Ferron, & Mumford, 2005), item analysis resulted in the deletion of nine items (see Table 2, Appendix II, for items and scores). The Kaiser-Meyer-Olkin (KMO: Kaiser, 1970) measure of sampling adequacy with the remaining 15 PBQ items indicated that the dataset was suitable for PCA (KMO = .82) as a desirable KMO is greater than .50 (Dziuban & Shirkey, 1974). Similarly, Bartlett's test of sphericity further indicated the appropriateness of PCA, $X^2(276) = 2799.94$; p < .001.

Number of factors. The primary investigator considered two strategies in determining the number of factors to extract (Parallel Analysis and Minimum Average Partial test). First, Parallel Analysis (Cota, Longman, Holden, & Fekken, 1993; Horn, 1965) compares eigen values from the actual data set to the 95th percentile of those from 100 randomly generated data sets matched on parameters (i.e., the number of variables and participants). The number of factors to extract equals the number of eigen values from the actual data set that are larger than those produced by the random data set. Second, the Minimum Average Partial test (MAP test: Velicer, 1976) examines the

matrix of partial correlations after each principal component has been partialled out. This process incorporates an additional principal component at each step. In their review, Zwick and Velicer (1986) reported that Parallel Analysis and the MAP test are two of the best methods of determining the number of factors in a dataset as they are usually accurate to within one factor of the underlying structure of the dataset and do not display a symptomatic bias in over- or under-estimating the number of factors. The Parallel Analysis and MAP tests (SPSS syntax: O'Connor, 2000) conducted with this sample both indicated a three-factor solution.

Optimal rotation. The optimal rotation was determined by evaluating three orthogonal rotations (i.e., Varimax, Quartimax, and Equamax) and five oblique rotations (i.e., Direct Oblimin [$\Delta = .5$, $\Delta = 0$, and $\Delta = -1$] and Promax [K = 2 and K = 4]). Saliency for coefficients was set at .40, which is considered conservative (Hogarty et al., 2005). The criterion of simple structure (i.e., salient coefficients for all items, a low number of complex items, and a high hyperplanar count) indicated a three-factor solution was optimal using an orthogonal rotation (Quartimax with Kaiser Normalization). This solution accounted for 54.27% of the variance; had an overall Cronbach's alpha of .74; salient coefficients ranging from .40 to .85; no complex items; and 16 hyperplanars (see Table 3, Appendix II, for items and scores).

Factor 1: *Parenting is not Learned* **subscale.** The first factor accounted for 23.70% of the variance, with coefficients ranging from 0.51 to .75 and Cronbach's α = .76 (see Table 4, Appendix II). This factor consisted of six items. The items on the factor appeared to indicate agreement with the idea that parenting behavior is learned (e.g., *Parenting is learned; I think parenting skills need to be learned*). Moreover, the items

appeared to indicate that good parenting skills need to be learned and can be improved upon (e.g., *No one is born a good parent, they must learn how to be a good parent; Even good parents would benefit from going to a parenting class*). As all of the items on this scale had been reversed scored, the items were interpreted and named the *Parenting is not Learned* subscale (PBQ-PNL). As all but one item (i.e., Children must be taught how to behave well) involved learning parenting skills, this subscale is analogous to the originally hypothesized construct, parenting is an innate ability, from the *Mothers Shouldn't Need Help Script*.

Factor 2: *Feel Accused of Bad Parenting* **subscale**. The second factor accounted for 20.88% of the variance, with coefficients ranging from 0.40 to .83 and Cronbach's *a* = .79 (see Table 4, Appendix II). This factor consisted of five items. Agreement with these items appears to indicate that participants did not believe they needed parenting classes (i.e., *I already know everything I need to know about parenting; Good parents are born, not made*) and that being asked to attend a parenting skills class has negative connotations (e.g., *Only people who are bad parents need to go to parenting classes*). Additionally, being asked to attend a parenting skills class may feel like an accusation of bad parenting (i.e., *If someone asked me to go to a parenting class I would feel like that person thought I was a bad parent; I would feel like a bad parent if I were asked to go to a parenting class*). Therefore, these items were interpreted and named the *Feel Accused of Bad Parenting* subscale (PBQ-FABP). This subscale is analogous to the hypothesized construct, perception of being accused of being a poor parent if asked to go to a parenting class, from the *Mothers Shouldn't Need Help Script*.

Factor 3: *Parental Responsibility* **subscale**. The third factor accounted for 9.69% of the variance and consisted of four items with Cronbach's $\alpha = .76$ (see Table 4, Appendix II). The reliability analyses for the third factor indicated that removal of one item (i.e., *Children will grow up behaving well if they are not taught how to misbehave*) would significantly improve Cronbach's alpha (i.e., $\alpha = .82$) and aide in interpretation of the factor. Therefore, this item was not retained in further analyses (see Table 4, Appendix II, for items and scores). Agreement with items on this factor indicated that participants believe parents are responsible for children's misbehavior (e.g., *It is the parents' fault if children behave badly; Parents are to blame for their children's bad behavior; It is the parents' fault if children misbehave*). Therefore, these items were interpreted and the subscale named Parental Responsibility (PBQ-PR). This subscale is analogous to the original hypothesized construct; parents are responsible for children's behavior, from the *Mothers Shouldn't Need Help Script*.

Authority Measure

General Attitude to Institutional Authority Survey. The General Attitude to Institutional Authority Survey [GAIAS] is a 32-item scale on which respondents indicate the degree of approval with which they view four authority groups: army, police, law, and teachers (Rigby, 1982). The response format consists of a five point Likert-type scale (1 = Disagree Strongly, 3 = Uncertain, 5 = Agree Strongly). An equal number of items are positively and negatively keyed. Ratings are summed to yield one overall score, with higher scores indicating more favorable attitudes towards authority.

Split-half reliability from the initial scale development resulted in significant positive correlations (p < .001) between the halves of the subscales (Rigby, 1982).

Furthermore, internal consistency as measured by Cronbach's alpha yielded coefficients of .91 and .94 for the total scale when used with college students in Australia and Britain (Rigby, 1982). A second validation study with prison officers, incarcerated prisoners, parole officers, and individuals on parole yielded similar results (α = .93: Rigby, 1982). As predicted, prisoners had the lowest scores, followed by individuals on parole, parole officers, and prison officers. The author indicated that the scale is therefore appropriate for use with this particular sample, for which authority issues tend to be highly salient. Thus, there is supporting evidence that the GAIAS may be used with groups for whom authority issues are important. It is important to note that for Rigby's (1982) study there were changes made to the wording of one of the questions in order to accurately reflect country affiliation (i.e., from "Australia" to "Britain"). Shorter versions and slightly modified versions of the scale have been used with cross-cultural samples of Italian college students and children in Sri Lanka (translations: Rump, Rigby, & Waters, 1985) and doctors (20-item version: Rigby, 1984a). Furthermore, attitudes toward institutional authority, as measured by the GAIAS, tend to generalize to other institutional authorities but not other non-authority individuals (Eamon, 2001).

Research with a 16-item version of the GAIAS (which included items 1, 5, 6, 7, 8, 9, 10, 11, 13, 17, 19, 22, 24, 26, 27, and 38) yielded Cronbach alpha = .89 for internal consistency (Rigby, 1984b), which was comparable to the long version (Rigby, 1984b). The four subscales had Cronbach's alphas of Police = .77; Army = .82; Law = .71; and Teachers = .62. Split-half reliability between the positively and negatively scored items was also statistically significant ($r_pr_n = .8, p < .001$). Consequently, I used the 16-item version of the GAIAS (Rigby, 1984b).

Modifications for the current study. A revised version of the short GAIAS was used in the current study. Participants in the qualitative study by Davis (2009) may have had negative experiences with individuals from social services (i.e., social workers) during their efforts to retain or regain custody of their children. Therefore, it was decided that questions specific to social workers would be appropriate to include in the current study. A pool of eight potential questions specific to social workers was generated, which included four positively and four negatively keyed items. Experts in the areas of survey development (N = 2: one doctoral and one masters-level researcher) and teaching parenting skills (N = 2: one doctoral and one masters-level clinician) reviewed the items for clarity and face validity. These experts rated each item on a 7-point Likert scale. Scores for each item were averaged and the top four items were selected for inclusion in the scale (see Table 5, Appendix II, for items and scores).

Further review of the short version of the GAIAS indicated the need for several changes in wording to make the measure more applicable to participants in this study. First, the term "Army", while perhaps an appropriate term for the military as a whole in Australia, does not reflect the inclusion of all military personnel given the structure of the armed forces in the U.S. Thus, this term was changed to "military" on all questions for use in this study. Similarly, "U.S." was substituted for "Australia". One statement about teachers only referred to male teachers and therefore the words "or ma'am" were added after "sir" to be more inclusive of both sexes.

Further, several questions used in the short version by Rigby (1984b) appeared either lower in face validity or were too complexly worded. Therefore, to make the language appropriate for an 8th grade reading level, as recommended by the Institutional

Review Board, more applicable questions were substituted from the original long version. In doing these substitutions particular care was taken to substitute items matched on negative or positive keying. Finally, all questions were formatted to match the nine point Likert scales format used in the PBQ (where 1 = Strongly Disagree, 5 = Neither *Agree nor Disagree*, and 9 = Strongly Agree). The final measure contained 20 items.

The 20-item modified version of the GAIAS used in the current study yielded Cronbach alpha = .84 for internal consistency, which was comparable to Rigby's (1984b) 16-item item short version. Two of the subscales had adequate internal consistency as measured by Cronbach alpha (Police = .76 and Social Workers = .70). However, the internal consistency of one subscale approached acceptability (Military = .67) whereas that for two subscales was less than acceptable (Law = .38 and Teachers = .52). All items were retained for use in the current study as the internal consistency for this version was comparable to internal consistency found in previous research; furthermore, deletion of any items also lowered the internal consistency of the overall scale. Although the total summed score for the GAIAS is typically used in analysis, the standardized mean of the total raw score was used rather than the summed total score to meet the requirements for the proposed analytic plan.

Socioeconomic Status

Given the complications inherent in measuring SES (see Cirino, Chin, Sevcik, Wolf, Lovett, & Morris, 2002; Duncan & Magnuson, 2003), I chose to measure it by asking questions about all four of the primary indicators that typically comprise SES: educational attainment, occupational prestige, income, and perceived wealth.

Measurement of these indicators included creating questions as well as using one frequently used measure of SES and creating a composite SES score (described below).

Barratt Simplified Measure of Social Status. Two of the indicators of SES, educational attainment and occupational prestige, were measured with the Barratt Simplified Measure of Social Status (BSMSS; Barratt, 2006). The BSMSS is a simplified measure of maternal/paternal, self/spouse completed education and occupational status based on the Hollingshead measure (Barratt, 2006). Ratings for occupations on the BSMSS are based on an updated, research-based list of occupational prestige completed by Davis, Smith, Hodge, Hakao, and Treas (1991). The BSMSS uses the same weighting system for education and occupational prestige as the Hollingshead measure (i.e., 3:5); however, the BSMSS also includes weighted scores for the individual's parents. Parent scores are not considered as much of an influence on SES as are the individual's current family scores, thus the self/spouse to maternal/paternal scores are weighted 2:1 (Barratt, 2006). Score totals range from 8 to 66.

Modifications for the current study. On the original BSMSS form, participants are provided directions to sum and weight their responses based on current and family of origin structure. For the current study, minor changes were made to the form so that the researcher could conduct these calculations. Additionally, the term "partner" was added to the "spouse" response options. Score totals for participants in this study ranged from 9.33 to 61.67 (M = 34.56, SD = 10.88).

Additional measures of socioeconomic status. On the demographic form, participants indicated their current income and estimated household income when they were 16 years old using two 9-point scales ranging from < \$20,000 and increasing in

\$10,000 increments to >90,000 (see Demographic Form: Appendix I). Additionally, research supports the use of "perceived wealth" as an indicator of wealth as recall of specific dollar amounts may not be accurate (Ghiselli, 1964; O'Guinn & Wells, 1989; Rindfleisch et al., 1997). Therefore, participants were also asked about Perceived Wealth in comparison to the average family in the U.S. for when they were age 16 and current Perceived Wealth on two items using a 9-point scale (1=lowest wealth to 9=highest *wealth*) (see Demographic Form: Appendix I). Although the questions were modified slightly for the current study to increase readability for the target population, previous research utilized these questions for measuring Perceived Wealth in a sample of college students (Thomas, 2010).

Weighted Income and Perceived Wealth scores for participants in the current study were calculated using a formula similar to that used in calculating the BSMSS score (i.e., ratings of current Income/Perceived Wealth to ratings of Income/Perceived Wealth when participant was age 16 were weighted 2:1). Score totals for Weighted Income ranged from 1 to 9 (M = 4.07, SD = 2.22) and for Weighted Perceived Wealth ranged from 1 to 9 (M = 4.40, SD = 1.66). Scores on the BSMSS were positively correlated with Weighted Income, r(371) = .49, p < .01 and Weighted Perceived Wealth, r(371) = .37, p < .01. Similarly, scores for Weighted Income and Weighted Perceived Wealth were positively correlated, r(371) = .53, p < .01.

Calculation of SES variable. Analysis of the BSMSS, Weighted Income, and Weighted Perceived Wealth scores using a *k*-means cluster analysis with a three-cluster solution determined categories for levels of SES. Although the use of a three-cluster solution had been determined a priori, the appropriateness of using a three-cluster

solution was also validated using Ward's method cluster analysis. Using cluster analysis maintained the relationships among the variables used as proxies for SES while allowing for an empirical and economical determination of levels for use in analyses. Cluster analysis is a group of multivariate, exploratory statistical methods used to classify objects or cases based on a naturally occurring underlying structure in a data set, thereby forming groups of highly similar cases (Aldenderfer & Blashfield, 1984). Cluster analysis is often free of the restrictive assumptions of normality required by other statistical procedures (Norusis, 2012).

K-means cluster analysis is a method of partitioned clustering whereby minimizing the *SS_{within}* using Euclidean distances produces a predetermined set of *k* clusters that allows for iterative assignment of cases to clusters to find the optimal solution for the data (Norusis, 2012). A priori specification of the number of clusters can be based on theory, evaluation of multiple solutions, or derived by evaluating a hierarchical technique such as Ward's method (Burns & Burns, 2008; Mooi & Sarstedt, 2011; Norusis, 2012). Ward's method is an agglomerative hierarchical clustering technique that minimizes within-cluster variance when combining clusters; however, Ward's method utilizes only one pass through the data and does not allow for the correction of poor early partitions like *k*-means clustering (Aldenderfer & Blashfield, 1984; Mooi & Sarstedt, 2011). Thus, the combination of the two methods allows for an objective determination for number of clusters with the optimal solution for the specified number of clusters.

Ward's method cluster. A hierarchical clustering process using Ward's method was conducted with participants' standardized z-scores for the three socioeconomic

variables (i.e., modified BSMSS, Weighted Income, and Weighted Perceived Wealth) to determine the number of clusters for use in the *k*-means analysis. The use of *z*-scores (rather than raw data) results in a more conservative analysis that allows variables measured on different scales to contribute equally to the cluster solution. Variables measured by larger numbers (e.g., BSMSS) contribute more to the distance between cases in cluster analyses than do variables measured by smaller numbers (Norusis, 2012). Investigation of the agglomeration schedule indicated the combination of dissimilar clusters in the transition from three to two clusters by a large change in coefficients (i.e., difference between coefficients = 166.6), as did visual inspection of the dendrogram. Therefore, these results supported using a three-cluster solution in the *k*-means cluster analysis.

K-means cluster. The *k*-means clustering analysis produced three clusters with predominantly low, medium, and high scores for each IV (see Figure 1, Appendix IV). I describe below the unique combinations of score means for the socioeconomic variables represented in each cluster, based on raw scores for ease in interpretability.

Descriptions of the resulting *SES cluster groups*. Individuals in Cluster 1, labeled the Middle SES group (MSES: n = 151), reported average levels of personal and family education as well as occupational prestige (BSMSS: M = 32.45, SD = 7.74). Similarly, they reported average incomes (Weighted Income M = 3.61, SD = 1.48) and perceived their wealth as average (Weighted Perceived Wealth M = 4.90, SD = 1.08). Conversely, individuals in Cluster 2 (labeled the Lower SES group [LSES]: n = 108), reported below average levels of personal and family education as well as occupational prestige (BSMSS: M = 26.70, SD = 9.02). Similarly, they reported below average income (Weighted Income: M = 2.11, SD = .97) and perceived their wealth as below average (Weighted Perceived Wealth: M = 2.47, SD = .90). Individuals in Cluster 3, labeled the Higher SES group (HSES: n = 114), reported higher than average levels of personal and family education as well as occupational prestige (BSMSS: M = 44.80, SD = 7.92). Similarly, although they reported higher than average incomes (Weighted Income M =6.54, SD = 1.52), they perceived their wealth as average (Weighted Perceived Wealth M= 5.57, SD = 1.22).

Validation of the SES cluster groups. A discriminant function analysis on the *k*means three-cluster solution determined which variables discriminated between the three SES groups (i.e., LSES, MSES, HSES).¹ The number of functions required to make this determination is one less than the number of IVs, which yielded two functions. Analysis of the structure matrix revealed that each of the three socioeconomic variables (i.e., BSMSS, Weighted Income, and Weighted Perceived Wealth) significantly correlated with one of the two functions. Specifically, two variables predicted the first function (BSMSS, r = .64 and Weighted Income, r = .44), which separated the HSES group from the MSES and LSES groups (canonical correlation = .89) and explained 93.7% of the variance between groups. One variable predicted the second function (Weighted Perceived Wealth, r = .83), which separated the MSES from the HSES and LSES groups (canonical correlation = .457) and explained 6.3% of the variance between groups.

Discriminant function analysis also provided information about the percent of cases correctly classified by the analysis into the three predefined categories (i.e., SES

¹ Although the log determinants were quite similar, the assumption of equality of covariance matrices was not met (Box's M = 82.67, p = <.001). This problem was not regarded as serious due to the large sample size (Burns & Burns, 2009).

groups) using the clustering variables (i.e., BSMSS, Weighted Income, and Weighted Perceived Wealth) in comparison to the probability of randomly classifying cases. The cross-validated classification indicated that 94.6% of cases were correctly classified, which is better than the 42.64% probability of classification by chance alone.

Racial Identity Measure

Cross Racial Identity Scale. The Cross Racial Identity Scale (CRIS: Vandiver, Cross, Fhagen-Smith, Worrell, Swim, & Cladwell, 2000; Vandiver, Cross, Worrell, & Fhagen-Smith, 2002; Worrell, Vandiver, & Cross, 2004) is a 40-item questionnaire designed to assess Black racial identity attitudes consistent with the revised and expanded versions of Cross' model of psychological nigrescence (Cross & Vandiver, 2001; Vandiver, Cross, Fhagen-Smith et al., 2002; Worrell et al., 2004). Initial exploratory factor analyses indicated six factors (Vandiver et al., 2002). Similarly, numerous additional studies using several factor analysis techniques have confirmed the six-factor structure with no item overlap (see Worrell & Watson, 2008 for a discussion). Confirmatory factor analyses support the six-factor model as fitting the data best (Vandiver et al., 2002; Worrell & Watson, 2008). Reliability estimates for the six subscales range from .78 to.86 (Cronbach's alpha) indicating good internal consistency (Worrell & Watson, 2008). In general, the CRIS is a well-validated measure (Worrell & Watson, 2008).

Each of the six subscales measure attitudes consistent with a specific racial identity from among three of the nigrescence themes outlined in Cross's expanded model (Worrell et al., 2004). Three subscales measure identities from the Pre-Encounter theme. Specifically, scores on the Assimilation (PreEPA) subscale reflect the degree to which

the individual holds a Eurocentric worldview and devalues African American values, actions, and culture. Scores on the Miseducation (PreEPM) subscale indicate the degree of agreement with generally negative stereotypes about the African American community resulting from an inaccurate and incomplete education about the roles of Africa and African Americans historically. Scores on the Self Hatred (PreEPSH) subscale denote the degree to which the individual internalizes negative stereotypes about the African American community.

Additionally, one subscale measures the Anti-White identity from the Immersion-Emersion theme. Scores on the Immersion-Emersion Anti-White Attitude (IEAW) subscale reflect the degree to which the individual endorses a strong Anti-White perspective. Scores on the Afrocentricity (IntlA) subscale indicate the degree to which the individual has internalized a strong positive, primarily Afrocentric perspective. The saliency of race varies on this scale and the Afrocentric perspective may be the singular focus. Scores on the Multiculturalist Inclusive (IMCI) subscale denote the degree to which the individual has internalized a positive Afrocentric identity while adopting a bicultural or multicultural perspective in which being African American is only one aspect of their identity. These individuals may reach out to mainstream European American culture or other racial or ethnic minorities.

Each subscale consists of five positively keyed questions. In addition, ten "filler" questions are used to separate subscales. The response format consists of a 7-point Likert-type scale (1 = Strongly Disagree, 4 = Neither Agree nor Disagree, 7 = Strongly Agree). Scores from each of the five items in a subscale may be summed or averaged to obtain a subscale score, with higher scores reflecting stronger endorsement of the attitudes

measured by the subscale. Each individual obtains a score on each of the six subscales, which the authors of the CRIS suggest interpreting as a profile (Worrell, Vandiver, & Cross, 2004). Several researchers have used cluster analyses to determine specific score profiles to aid in interpretation of CRIS racial identity attitude scores (Whittaker & Neville, 2010; Worrell, Vandiver, Schaefer, Cross, & Fhagen-Smith, 2006). Worrell et al. (2006) found both five and six-cluster solutions in two samples of college students. Subsequent research using *k*-means cluster analysis supported the profiles found in the five-cluster solution (Whittaker & Neville, 2010).

Modifications for the current study. The first section of the CRIS was used to collect demographic data. As a number of items in this section were redundant with items on the demographic and SES measures used in this study, redundant items were not administered more than once. Among participants in the current study, each of the six subscales had adequate to good reliability with alphas for Pre-Encounter Assimilation (PreEPA) = .80; Pre-Encounter Miseducation (PreEPM = .86; Pre-Encounter Self-Hatred (PreEPSH) = .89; Immersion-Emersion (IEAW) = .93, Afrocentric (IntlA) = .84, and Multiculturist (IMCI) = .76.

Ward's method cluster. Investigation of the agglomeration schedule and dendrogram using Ward's method with z-scores of the six CRIS subscale variables indicated the combination of dissimilar clusters in the transition from five to four clusters by a large change in coefficients (i.e., difference between coefficients = 90.5). These results supported using a five-cluster solution in the *k*-means cluster analysis. This number of clusters is also consistent with the findings of previous research (Whittaker & Neville, 2010; Worrell et al., 2006).

K-means cluster. The *k*-means cluster analysis of the six CRIS subscales for the 308 African American participants yielded five unique combinations of CRIS subscale scores (see Figure 2, Appendix IV). The unique profiles of CRIS subscale score means represented in each cluster are further described below (based on raw scores for ease in interpretability with 1 = Strongly Disagree, 4 = Neither Agree nor Disagree, and 7 = Strongly Agree).

Descriptions of the resulting CRIS cluster groups. Individuals in Cluster 1, labeled the Emerging Multiculturalist group (EMC: n = 83), indicated that they held a less Eurocentric worldview and more highly valued African American culture than did individuals in the other groups (Pre-EPA M = 3.16, SD = 1.01). Moreover, these individuals indicated low agreement with and internalization of generally negative stereotypes about the African American community (Pre-EPM M = 2.97, SD = 1.31; Pre-EPSH M = 1.53, SD = .76). Although individuals in this group tended towards internalizing a positive Afrocentric perspective (IntlA M = 3.32, SD = 1.12), they reported stronger bicultural or multicultural perspectives in which being African American was only one aspect of their identity (IMCI M = 5.52, SD = .88). They also did not hold strong anti-White attitudes (IEAW M = 1.24, SD = .42). These individuals appear to be moving out of the Immersion-Emersion stage of Cross's theory and into the Multiculturalist stage.

Individuals within Cluster 2, named the Multiculturalist group (MC: n = 94), endorsed a more neutral Eurocentric worldview and a devaluing of African American values, actions, and culture (Pre-EPA M = 5.68, SD = .84). These participants indicated lower agreement with generally negative stereotypes about the African American

community (Pre-EPM M = 2.60, SD = 1.16) and less internalization of negative stereotypes about the African American community than did individuals in the other groups (Pre-EPSH M = 1.32, SD = .49). Moreover, these individuals reported less intense anti-White attitudes than did individuals in the other groups (IEAW M = 1.10, SD = .39). Individuals in this group also had less of a strong positive, primarily Afrocentric perspective than did individuals in the other groups (IntlA M = 2.39, SD = 1.05). In contrast, they reported a higher level of internalization of a positive Afrocentric identity and a bicultural or multicultural perspective than did individuals in the other groups (IMCI subscale (M = 5.83, SD = .99). This score profile replicated the Multiculturalist groups found in previous research (Whittaker & Neville, 2011; Worrell et al., 2006).

Individuals in Cluster 3, named the Miseducated Variant group (MVC: n = 44), generally devalued African American values, actions, and culture in favor of a Eurocentric worldview compared to the other groups (Pre-EPA M = 5.71, SD = .90). Similarly, they held more negative stereotypes about the African American community that reflect an inaccurate and incomplete education about the roles of Africa and African Americans than did the other groups (Pre-EPM M = 5.08, SD = 1.21). However, they did not strongly internalize these negative stereotypes about the African American community (Pre-EPSH M = 3.24, SD = 1.40). Consistent with their endorsement of a Eurocentric worldview, individuals in the group indicated they held few anti-White attitudes (IEAW M = 1.49, SD = .65) and minimal internalization of a positive Afrocentric identity (IntlA M = 3.97, SD = 1.09). In contrast, they reported some positive attitudes towards adoption of a bicultural or multicultural perspective in which being African American was only one aspect of their identity (IMCI M = 5.68, SD = .96). This score profile was consistent with that of the Miseducated Variant from the Worrell et al. (2006) study.

Individuals in Cluster 4, named the Immersion group (IC: n = 30), indicated they held stronger anti-White attitudes (IEAW M = 4.79, SD = .99), internalized negative stereotypes about African Americans (Pre-EPSH M = 5.17, SD = .85), and yet internalized a more positive Afrocentric identity (IntlA M = 5.16, SD = .76) than did individuals in the other groups. This finding was consistent with previous research (Whittaker & Neville, 2011; Worrell et al., 2006). Additionally, they indicated little miseducation about African American culture and history (Pre-EPM M = 4.87, SD = .87), and neutral attitudes towards their African American heritage and Eurocentric worldview (Pre-EPA M = 5.15, SD = .94). They also held relatively neutral attitudes towards bicultural or multicultural perspectives (IMCI M = 5.19, SD = .90). These findings are consistent with the findings of Whittaker and Neville (2011) and Cross's Immersion-Emersion stage in which a person commits to developing his or her new Afrocentric identity stage of nigrescence.

Individuals in Cluster 5, named the Low Race Saliency group (LRSC: n = 57), did not hold strong anti-Black attitudes (Pre-EPA M = 3.84, SD = 1.16; Pre-EPM M = 2.63, SD = 1.10; and Pre-EPSH M = 2.58, SD = 1.39). Similarly, they also indicated they did not hold strong pro or negative attitudes towards Whites or multiculturalism (IEAW M =2.32, SD = 1.35; IntlA M = 2.65, SD = 1.09; and IMCI M = 3.76, SD = .85). This profile, one in which race is not a salient factor, was consistent with previous research (Whittaker & Neville, 2011; Worrell et al., 2006).

Validation of the CRIS cluster groups. Discriminant function analysis on the kmeans clusters determined which variables discriminated between groups assigned through cluster analysis.² The number of functions required to make this determination is one less than the number of IVs, which yielded four functions. Analysis of the structure matrix revealed that all six CRIS subscales significantly correlated with one of the four functions. Specifically, two subscales predicted the first function (IEAW, r = .75 and Pre-EPSH, r = .64); which separated the MVC, IC, and LRSC groups from the EMC and MC groups (canonical correlation = .88, explaining 56.1% of the variance between CRIS groups). One measure predicted the second function (Pre-EPA, r = .93); which separated the MC, MVC, and IC groups from the EMC and LRSC groups (canonical correlation = .77, explaining 24.4% of the variance between CRIS groups). Two measures predicted the third function (Pre-EPM, r = .58 and IntlA, r = .54); which separated the EMC, MVC, and IC groups from the MC and LRSC groups (canonical correlation = .689, explaining 14.7% of the variance between CRIS groups). One measure predicted the fourth function (IMCI, r = .62); which separated the EMC, MC, and IC groups from the MVC and LRSC groups (canonical correlation of .476, explaining 4.8% of the variation between CRIS groups).

Discriminant function analysis also provided information about the percent of cases correctly classified by the analysis into the predefined categories (i.e., CRIS groups) by using the clustering variables (i.e., Pre-EPA, PreEPM, PreEPSH, IEAW, IntlA, and IMCI subscale scores) in comparison to the probability of randomly

² Although the log determinants were quite similar, the assumption of equality of covariance matrices was not met (Box's M = 429.99, p = <.001); however, given the large sample, this problem is not regarded as serious (Burns & Burns, 2009).

classifying cases. The cross-validated classification indicated that 92.2% of cases were correctly classified, which is better than the 28.74% probability of classification by chance alone.

Section 3: Procedure

The primary investigator and research advisor obtained approval to conduct the study from the Social and Behavioral Sciences Committee of the University of Nevada Las Vegas Institutional Review Board (IRB) prior to commencing study procedures.

Recruitment

Participants were recruited through six methods. First, Clark County School District Research Department (CCSD-RD) randomly selected 2000 mothers that met the study criteria. Specifically, they selected African American and European American mothers from a range of socioeconomic statuses among all student records in the school district. A ratio of six African American to one European American mother was selected to attain ample group sizes for each of the anticipated six racial identity attitudes measured by the CRIS. CCSD-RD sent recruitment letters to these mothers (see Appendix V) inviting them to participate in a survey about parenting beliefs and issues relevant to participation in parenting skills classes. The mothers had the option of participating online via SurveyMonkey (n = 17) or by calling the primary investigator on a dedicated cell phone (n = 3). The second method was via flyers posted in public locations (e.g., grocery stores, Laundromats, church bulletin boards, daycare centers, etc.). Flyers contained the same information as the aforementioned recruitment letter in abbreviated format (see Appendix VI). A total of three mothers participated via this recruitment method.

The third recruitment method was via word of mouth referral from mothers that participated via one of the first two methods. After data collection was completed, mothers were asked to tell their friends who meet inclusionary criteria (i.e., African or European American mothers of children ages birth to 18 years old) about the study. A total of five mothers participated via this recruitment method. The fourth recruitment method was via the UNLV psychology department subject pool. Participants were limited to those fulfilling the aforementioned criteria. These participants completed all measures online via SurveyMonkey (n = 109). The fifth recruitment method was via flyers posted on social media websites (e.g., Facebook and Craigslist), which were electronic versions of the aforementioned recruitment flyer (see Appendix VI). Callers were screened for inclusion criteria upon calling (n = 3) or emailing the researcher (n = 22).

After 14 months of data collection, extremely low response rates from the first five recruitment methods necessitated the addition of the sixth recruitment method: SurveyMonkey Audience. For a fee per completed survey, SurveyMonkey Audience contacts individuals in their database who meet researcher specifications. As a result, data collected via this method may yield a higher ratio of upper income, more highly educated individuals than data collected via other methods. In an attempt to compensate for this possibility, the primary investigator specified solicitation of individuals based on specific demographic variables (i.e., income brackets, race/ethnicity, and parental status). In an effort to obtain the aforementioned ratio of African American to European American participants from a range of socioeconomic statuses, the number of individuals requested from each demographic variable was based on the demographic composition of study respondents at that time. Individuals who met demographic study criteria, and had signed

up to receive and complete SurveyMonkey Audience surveys online, were sent an email invitation and individualized link to participate in this study. A total of 517 mothers participated via this recruitment method.

Compensation

Participants recruited through the subject pool were compensated with the standard course credit per hour of participation. To compensate mothers recruited via flyers, personal referrals, mail invitations, and social media sites the participants' contact information was entered once in a drawing for a \$25 gift card from Wal-Mart. Drawings took place after the completion of every 50th survey until all recruitment was completed. During each drawing, one participant's contact information (e.g., email address, telephone number, or physical address) was selected using a random sampling data selection process in SPSS. Recipients were notified of their winning status (n = 2) and the gift card was mailed to them at a mailing address they provided. All records of participant contact information were deleted following the close of data collection and the distribution of gift cards.

Participants recruited via SurveyMonkey Audience were compensated via SurveyMonkey's standardized reward process. Specifically, each time respondents complete an eligible survey, SurveyMonkey made a contribution of \$0.50 to a charity of their choice and each participant was directed to a webpage where she received instructions on how to enter the \$100 Instant Win Sweepstakes Game per SurveyMonkey Audience terms and official rules.

Data Collection

Data collection was done via SurveyMonkey for all participants. The primary researcher or one of two research assistants completed data collection online while talking with mothers that opted for the telephone administration. Completion time for all survey questions for the final sample ranged from 6 to 66 minutes (M = 22, SD = 10).

Online surveys. Participants from the UNLV Psychology Department Subject Pool participated in the study by registering for the study via their Sona-System subject pool account. Mothers recruited from all other methods received an email with a personal link to access the survey instruments on SurveyMonkey. All participants who elected to participate online were able to read, print, and electronically indicate consent after reading the informed consent. All contact information for non-subject pool participants recruited from the community via CCSD letter, personal referral, flyer, and social media sites were entered in an excel spreadsheet and checked against other contact information to verify uniqueness of the entry. No duplicate entries were received. Each participant was presented with the PBQ, GAIAS, BSMSS, and demographic form. The demographic form was administered prior to the CRIS so that the appropriateness of administering the CRIS could be evaluated. Only participants who self-identify as Black, African, or African American were administered the CRIS. Upon completion of data collection the participants were asked to tell other mothers about the study and to provide them the telephone number or email address to contact the researcher.

Telephone surveys. For telephone administration, participants called a dedicated cell phone number at their convenience to answer survey questions. Upon calling, participants were asked to confirm that they are mothers who are at least 18 years old.

The primary researcher or one of two research assistants then read the informed consent to the participants, which explained the purpose of the study (i.e., understanding parenting beliefs and views that may influence participation in parenting classes), the confidentiality of the telephone survey and the minimal risk associated with the entry of answers via SurveyMonkey. Participants were informed about their rights as research participants, including the right to withdraw from the study at any time. The researcher or research assistant then asked for verbal consent to participate in the survey and documented the verbal consent on the SurveyMonkey informed consent form. The participant was then asked to supply contact information for entry into the gift card drawing. All contact information was entered in an excel spreadsheet and checked against other addresses to verify uniqueness of the entry. Duplicate entries were not received.

The primary researcher or research assistant then read each item to the participant and recorded her response via SurveyMonkey. A researcher read each participant the questions from the PBQ, GAIAS, BSMSS, and demographic form. The demographic form preceded the CRIS so that the appropriateness of administering the CRIS could be evaluated. Only participants who self-identify as Black, African, or African American were administered the CRIS. Upon completion of data collection, the participants were asked to tell other mothers about the study and to provide them the telephone number or email address to contact the researcher. At the completion of data collection, all contact information and emails requesting links to the study were deleted.

Section 4. Analytic Strategy

As described above, four measures were created and/or evaluated prior to testing the key study hypotheses. To summarize these measures, first and most importantly, I created a 24-item questionnaire of the four parenting belief constructs depicted in Davis' (2009) *Mothers Shouldn't Need Help Script* named the Parenting Beliefs Questionnaire (PBQ). Following administration of the PBQ to participants in this study, item analysis resulted in deletion of nine items. Principal components analysis with a Quartimax rotation of the remaining 15 items resulted in a three-factor solution that accounted for 54.27% of the variance and supported three of the four hypothesized constructs in the *Mothers Shouldn't Need Help Script*. These constructs each demonstrated acceptable internal consistency (i.e., Cronbach's alphas ranging from .76 to .82) and included: parenting as an innate ability (PBQ-PNL); perception of being accused of being a poor parent if asked to go to a parenting skills class (PBQ-FABP); and parental responsibility for children's behavior (PBQ-PR). The means for these subscales were retained for all primary analyses described below.

Second, SES was measured using four indicators of socioeconomic status (i.e., educational attainment, occupational prestige, income, perceived wealth). The Barratt Simplified Measure of Social Status (BSMSS) was used to collect data on educational attainment and occupational prestige for participants, spouse/partner, and parents. Additionally, four questions using 9-point Likert-type scales measured Income and Perceived Wealth for the family of origin when participants were 16 years old and the current participant/spouse information. As the effects of SES may be intergenerational (Duncan & Magnuson, 2003; Klebanov & Crane, 1998; Phillips et al., 1998), participant/spouse and parent data were weighted 2:1 on all measures. Initial cluster analysis of the measures of SES (i.e., BSMSS, Weighted Income, and Weighted Perceived Wealth) using Ward's method indicated that a three-cluster solution described

the underlying structure of the data. A subsequent *k*-means cluster analysis yielded the optimal solution for the three groups. Score profiles for the groups indicated a Higher SES group (HSES), a Middle SES group (MSES), and a Low SES group (LSES), which were retained to test the core study hypotheses below.

Third, I modified an existing measure of attitudes towards authority, the 16-item short version of the General Attitudes toward Institutional Authority Scale (GAIAS), by substituting items from the longer version to increase face validity and improve reading level. Additionally, four items referring to social workers, an authority figure particularly relevant in recruiting for parenting skills classes, were added. Internal consistency (α = .84) for the 20-item measure was comparable to that found in previous research with the short version of the measure (α = .89: Rigby, 1984b) and was used in all additional analyses.

Finally, African American identity attitudes were measured with the Cross Racial Identity Scale (CRIS). Initial cluster analysis of the six subscales of the CRIS (i.e., Pre-EPA, PreEPM, PreEPSH, IEAW, IntlA, and IMCI) using Ward's method indicated that a five-cluster solution described the underlying structure of the data. A subsequent *k*-means cluster analysis yielded the optimal solution for the five groups. Four of the score profiles for the groups replicated score profiles found in previous research (i.e., Miseducated Variant [MVC], Immersion [IC], Low Race Saliency [LRSC], and Multiculturalist (MC): Whittaker & Neville, 2011; Worrell et al., 2006) and one, the Emerging Multiculturalist group (EMC), was unique to this data set. Group membership was retained for further analysis.

Hypothesis 1

I hypothesized that this sample of African American mothers would endorse similar beliefs about how parental responsibility for how children behave (PBQ-PR), parenting as an innate ability (PBQ-PNL), and parental attitudes toward authority figures (GAIAS) influence how needing help with parenting is perceived (PBQ-FABP) as outlined in the *Mothers Shouldn't Need Help Script* (Davis, 2009). Multiple regression was used to explore the theoretical linear relationships between the constructs in the *Mothers Shouldn't Need Help Script* (Davis, 2009).

Hypothesis 2a

I hypothesized that parenting beliefs (PBQ-PR, PBQ-PNL, and PBQ-FABP) and attitudes toward authority (GAIAS) would define two or more groups with unique score profiles that were distinct in regards to members' self-reported African American racial identity attitudes. Chi-squared analyses determined whether the resulting PBQ/GAIAS cluster groups differed significantly in regards to members' African American racial identity attitude profiles (i.e., CRIS group membership).

Hypothesis 2b

I hypothesized that the aforementioned PBQ/GAIAS groups would be distinct in regards to members' SES group membership. Chi-squared analyses determined whether the PBQ/GAIAS groups significantly differed in regards to SES group membership among African American participants.

Hypothesis 2c

I hypothesized that the aforementioned PBQ/GAIAS groups would be distinct in regards to members' self-reported African American racial identity attitudes and level of

SES (CRISxSES). The five CRIS groups were further divided by SES status to form 15 CRISxSES groups. Chi-squared analyses with the 15 groups determined whether the PBQ/GAIAS groups significantly differed in regards to CRISxSES group membership.

Hypothesis 3a

I hypothesized that membership in the aforementioned PBQ/GAIAS groups would be distinct in regards to members self-reported race/ethnicity (i.e. African American or European American). Chi-squared analyses determined whether the PBQ/GAIAS group membership significantly differed in regards to race/ethnicity.

Hypothesis 3b

I hypothesized that membership in the aforementioned PBQ/GAIAS groups would differ in regards to members' SES group membership. Chi-squared analyses determined whether the PBQ/GAIAS groups significantly differed in regards to SES group membership for the combined sample of African American and European American mothers.

Hypothesis 3c

I hypothesized that membership in the aforementioned PBQ/GAIAS groups would differ in regards to members' race/ethnicity and level of SES. African American and European American mothers were further divided into groups by SES status to form six race/ethnicity X SES groups. Chi-squared analyses conducted with the six groups determined whether the PBQ/GAIAS groups significantly differed in regards to race/ethnicity X SES group membership.

Sample Size

Factor analysis. One hundred participants are considered the minimal sample size for conducting a factor analysis; however, a ratio of 5:1 or 10:1 (participants to variables) is considered preferable (Hair et al., 1995). By the more conservative criteria, the minimal sample size for this study is 240 (i.e., 10 participants for each of 24 PBQ questions). Indeed, Comrey and Lee (1992) recommended that sample sizes of 100 are poor, 200 are fair, 300 are good, 500 are very good, and 1,000 or more are excellent (as cited in MacCallum, Widaman, Zhang & Hong, 1999).

Cluster analysis. Although a minimal sample size for cluster analysis has not yet been defined, Dolnicar (2002) suggests that one consider the number of cases to be grouped in comparison to the number of dimensions (i.e., variables used to form clusters - 1). One suggestion she makes is that the sample size be larger than 2^k where k is the number of variables and that a more conservative estimate would be $5*2^k$. Thus for this study the minimal sample size for the cluster analysis would be 80 (i.e., $5*2^4 = 80$).

Multiple regression. The minimal sample size when conducting a multiple regression is 5:1 (participants to independent variable); however, smaller sample sizes may "over fit" the data, thereby decreasing the generalizability of the data. Therefore, suggested sample sizes vary considerably (e.g., from 15:1 to 50:1) depending on desired statistical power, ability to generalize results, and type of multiple regression employed (Hair et al., 1995). According to the more conservative criteria, the minimal sample size for this study is 150 (i.e., 50 participants for each of the two PBQ subscales and the GAIAS).

Discriminant function analysis. Minimal sample size for discriminant function analysis is the larger of the number of independent variables plus three or more cases (Klecka, 1980; Morrison, 1984; Poulsen & French, n.d.) or 20 cases per group. A more conservative estimate of the larger of 20:1 (i.e., 20 cases per independent variable: Morrison, 1984; Poulsen & French, n.d.) or 20 cases per group is recommended. The total number of groups necessary to investigate the study hypotheses is 18. Specifically, for African Americans with 3 levels of SES each with 5 levels of racial identity attitude profiles results in 15 groups, whereas for European Americans, 3 levels of SES results in 3 groups. Using the more conservative estimate for 18 groups yields a minimum sample size of 360 mothers. Alternately, the total number of independent variables is four, thus four times 20 cases per variable equals a minimum sample size of 80. Thus, for discriminant function analysis the minimum sample size for this study would be 360 mothers.

Thus, the sample size of 373 in this study meets or exceeds the recommended sample sizes for all of the analytic approaches used herein.

CHAPTER 4

RESULTS

Section 1: Research Question 1

Multiple regression was used to explore the theoretical relationships between the constructs in the *Mothers Shouldn't Need Help Script* (Davis, 2009) in this sample of African American mothers.

Multiple Regression

Assumptions. The data were screened for violations of assumptions prior to regression analyses. Statistically significant correlations between the independent variables (i.e., PBQ-PNL, PBQ-PR, and GAIAS) and the dependent variable (i.e., PBQ-FABP) in the correlation matrix indicated that the variables satisfied the criteria for the assumption of linearity (see Table 6, Appendix II, for correlations and descriptive statistics).

Tolerances were greater than .10 (i.e., ranging from .92 to .96) and the variance inflation factor was less than 10 (i.e., ranging from 1.04 to 1.09) for all variables, indicating no problem with multicollinearity. Evaluation of the scatter plot of the residuals against the predicted values indicated homogeneity of variance as there was no pattern to the residuals plotted against the predicted values. Analysis of standardized Dfbeta values resulted in no standardized Dfbeta values < -2 or > 2, supporting the conclusion that the dataset does not include outliers or influential cases.

The histogram of residuals also indicated that the data generally followed a normal distribution. Thus, based on these results, the normality of residuals assumption is satisfied. Evaluation of skew and kurtosis for each independent variable indicated a normal distribution; however, the Shapiro-Wilk tests of normality indicated non-normal distributions (p < .01) for all variables. These results may be a result of oversensitivity to statistical significance due to large sample size as the normality test may detect statistically significant, but trivial, departures from normality that will have no real effect on the multiple linear regression's tests (Bohrnstedt & Carter, 1971; Hair et al., 1995). Additionally, visual inspection of normal Q-Q plots for each variable indicated only slight variation from the expected distribution. Furthermore, investigation of normality plots for transformations (i.e., log10, log e, square root, squared, and cubed) all resulted in significant increase in deviations from normality after transformation. According to Bohrnstedt and Carter (1971), regression analysis is quite robust against violations of normality. Therefore, analyses were continued using the means of raw scores.

Results for African American participants. A multiple linear regression model was conducted with scores from African American participants to determine whether feelings of being accused of being a bad parent (i.e., PBQ-FABP) could be predicted from beliefs that parenting skills are an innate ability (i.e., PBQ-PNL), that parents are responsible for their children's misbehaviors (i.e., PBQ-PR), and negative attitudes toward authority (i.e., GAIAS). The results of the regression indicated that the three predictors explained 18.51% of the variance ($R^2 = .19$, F(3, 304) = 23.02, p < .001) in scores on the PBQ-FABP (see Table 7, Appendix II). Specifically, PBQ-PNL ($\beta = .31$, p < .001), PBQ-PR ($\beta = .29$, p < .001), and GAIAS PBQ- ($\beta = -.16$, p < .01) significantly predicted PBQ-FABP scores. In other words, consistent with hypotheses, stronger beliefs that parenting skills are an innate ability (i.e., PBQ-PNL) and that parents are responsible for their children's misbehaviors (i.e., PBQ-PNL) and that parents are responsible for their children's misbehaviors (i.e., PBQ-PNL) and that parents are responsible for their children's misbehaviors (i.e., PBQ-PNL) and that parents are responsible for their children's misbehaviors (i.e., PBQ-PNL) and that parents are responsible for their children's misbehaviors (i.e., PBQ-PR) predicted stronger feelings of being

accused of being a bad parent (PBQ-FABP). Moreover, more accepting and approving attitudes toward authority figures (i.e., GAIAS) predicted lower scores for feelings of being accused of being a bad parent (PBQ-FABP). An alternate interpretation of this last finding is that the more negative the attitude toward authority, the more the individual feels accused of being a bad parent.

Post hoc analysis of European American mothers. It is possible that the theoretical relationships between the constructs in the Mothers Shouldn't Need Help Script (Davis, 2009), which were supported by multiple regression with the sample of African American mothers, also apply to European American mothers. Therefore, a post hoc decision was made to investigate the predictive ability of the Mothers Shouldn't Need Help Script with the sample of European American participants. Scores were screened for violations of assumptions. The assumption of linearity was not met as only one statistically significant correlation between the IVs and DV was found in the correlation matrix (see Table 8, Appendix II). Tolerances were greater than .10 (i.e., ranging from .85 to .91) and the variance inflation factor was less than 10 (i.e., ranging from 1.11 to 1.17) for all variables, indicating no problem with multicollinearity. Evaluation of the scatter plot of the residuals against the predicted values was not possible, as residuals were not provided by the output from the analyses, thus the homogeneity of variances could not be evaluated. Similarly, the presence of outliers and influential cases could not be evaluated. Evaluation of skew and kurtosis for each independent variable indicated normal distributions of scores on the PBQ-PR and GAIAS; however, the distribution of scores on the PBQ-PNL was leptokurtic. Shapiro-Wilk tests of normality indicated normal distributions (p > .05) for PBQ-PR, GAIAS, and PBQ-FABP but not for the PBQ-

PNL (p < .05). Visual inspection of normal Q-Q plots for this variable indicated only slight variation from the expected distribution. Furthermore, investigation of normality plots for transformations (i.e., log10, log e, square root, squared, and cubed) all resulted in significant increase in deviations from normality after transformation. Therefore, analyses were continued using the means of raw scores.

A multiple linear regression model was conducted with scores from European American participants to determine whether feelings of being accused of being a bad parent (i.e., PBQ-FABP) could be predicted from beliefs that parenting skills are an innate ability (i.e., PBQ-PNL), that parents are responsible for their children's misbehaviors (i.e., PBQ-PR), and attitudes toward authority (i.e., GAIAS). The results of the regression were not statistically significant ($R^2 = .08$, F(3, 61) = 1.82, p = .15; see Table 9, Appendix II). Data from this sample of European American participants does not fit the model hypothesized in the *Mothers Shouldn't Need Help Script*.

Section 2: Research Question 2

For research question 2, groups were formed using *k*-means cluster analysis of the three PBQ subscales (FABP, PNL, and PR) and the GAIAS. Chi-squared analyses conducted with the PBQ/GAIAS groups determined if they varied significantly in regards to racial identity score profiles, SES cluster membership, or SESxRacial identity group membership.

PBQ/GAIAS Clusters

Ward's method cluster. A hierarchical clustering process using Ward's method was conducted with standardized z-scores for the averages of participants' responses on the three PBQ subscales (i.e., PR, FABP, and PNL) and GAIAS to determine the number

of clusters for use in the *k*-means analysis. Investigation of the agglomeration schedule indicated the combination of dissimilar clusters in the transition from four to three clusters (i.e., difference between coefficients = 153.7), as did visual inspection of the dendrogram. Therefore, these results supported using a four-cluster solution in the *k*-means cluster analysis.

K-means cluster. The *k*-means cluster analysis of the three PBQ subscales (FABP, PNL, and PR) and the GAIAS indicated four unique score profiles in the underlying structure of the data for the combined sample of African American and European American mothers (see Figure 3, Appendix IV). The unique combinations of score means are further described below, based on raw scores for ease in interpretability (with 1= *Strongly Disagree*, 5 = *Neither Agree nor Disagree*, and 9 = *Strongly Agree*).

Descriptions of the resulting PBQ/GAIAS cluster groups. Individuals in Cluster 1, who I named the Ambivalent group (P/G-AM: n = 65), reported relatively neutral feelings about being asked to attend parenting classes (PBQ-FABP: M = 4.73, SD= 1.38). These individuals were also ambivalent about whether parenting skills can be learned (PBQ-PNL: M = 4.53, SD = .95) and in their attitudes towards authority figures (GAIAS: M = 5.13, SD = .73). They also indicated some ambivalence in their views about whether parents are responsible for children's misbehavior (PBQ-PR: M = 4.60, SD= 1.51).

Individuals in Cluster 2, who I labeled the Affirmative group (P/G-AFF: n = 92), reported not feeling very negatively about being asked to attend parenting classes (PBQ-FABP: M = 2.72, SD = 1.06) and believed that parenting skills can be learned (PBQ-PNL: M = 2.51, SD = .92). Additionally, individuals in this group reported the most positive attitudes towards authority figures among all the four groups (GAIAS: M = 6.66, SD = .61). Scores for members of the P/G-AFF group indicated a more neutral perspective about whether parents are responsible for children's misbehavior (PBQ-PR: M = 4.70, SD = 1.76). Overall, these individuals appear to hold positive views toward learning parenting skills and toward authority figures.

Individuals in Cluster 3, who I named the Irresponsible group (P/G-IRR: n = 109), reported not feeling negatively about being asked to attend parenting classes (PBQ-FABP: M = 2.63, SD = 1.01) and believed that parenting skills can be learned (PBQ-PNL: M = 2.39 SD = .86). These scores were similar to those reported by the P/G-AFF group. However, individuals in this group reported ambivalent attitudes about parental responsibility for children's misbehavior (PBQ-PR: M = 5.09, SD = 1.85) and ambivalence towards authority figures (GAIAS: M = 4.86, SD = .74) that were similar to those reported by the P/G-AM group. Overall, these individuals appear to hold positive views toward learning parenting skills but are ambivalent about parental accountability and authority figures.

Individuals in Cluster 4, who I named the Conscientiousness group (P/G-CONS: n = 53), reported feeling more negatively than did the other three groups about being asked to attend parenting classes (PBQ-FABP: M = 5.53, SD = 1.49). Similarly, they reported believing more strongly than did the other groups that parents are responsible for children's misbehavior (PBQ-PR: M = 7.06, SD = 1.18). They also reported slightly more positive attitudes toward authority figures (GAIAS: M = 5.62, SD = .69) and believed more strongly than did the other groups that parenting skills can be learned (PBQ-PNL: M = 2.38, SD = .79).

Validation of the PBO/GAIAS cluster groups. Discriminant function analysis performed on the k-means clusters determined which independent variables discriminated between groups assigned through cluster analysis.³ The number of functions required to make this determination is one less than the number of IVs, which yielded three functions. Analysis of the structure matrix revealed that the four IVs (PBP-FABP, PBQ-PNL, PBQ-PR, and GAIAS) significantly correlated with one of the three functions. Specifically, two IVs predicted the first function (PBQ-FABP, r = .68 and PBQ-PNL, r =.62); which separated the P/G-AM and P/G-CONS groups from the P/G-AFF and P/G-IRR groups (canonical correlation = .772, explaining 44.1% of the variation between PBQ/GAIAS groups). One variable predicted the second function (GAIAS, r = .66); which separated the P/G-AM, P/G-AFF, and P/G-CONS groups from the P/G-IRR group (canonical correlation = .73, explaining 34.2% of the variation between PBQ/GAIAS groups). Similarly, one variable predicted the third function (PBQ-PR, r = .57); which separated the P/G-AM and P/G-AFF groups from the P/G-IRR and P/G-CONS groups (canonical correlation = .648, explaining 21.7% of the variation between PBQ/GAIAS groups).

Discriminant function analysis also provided information about the percent of cases correctly classified into the groups using the IVs in comparison to the probability of randomly classifying cases into the groups. The cross-validated classification indicated that 92.2% of cases were correctly classified, which is better than the 32.42% probability of classification by chance alone.

³ Although the log determinants were quite similar, the assumption of equality of covariance matrices was not met (Box's M = 81.83, p = <.001); however, given the large sample, this problem is not regarded as serious (Burns & Burns, 2009).

Hypothesis 2a

Chi-squared analysis indicated the four PBQ/GAIAS groups (i.e., P/G-AM, P/G-AFF, P/G-IRR, and P/G-CONS) differed significantly in regards to African American racial identity attitude profiles (i.e., CRIS group membership), χ^2 (12, n = 308) = 106.22, p < .001 (see Table 10, Appendix II). Specifically, the P/G-AM group was comprised of fewer individuals from the EMC, MC, and MVC racial identity groups than expected. Subscale scores among CRIS score profiles for these groups suggest that fewer individuals than expected reported low levels of internalization of negative stereotypes about the African American community and disagreement with anti-White attitudes. This group also contained more individuals from the IC and LRSC groups than expected, suggesting that more individuals than expected did not hold strong positive or negative attitudes towards their African American heritage. Similarly, more individuals in this group endorsed relatively neutral attitudes regarding Whites, Afrocentricity, and multiculturalism.

Additionally, the P/G-AFF group was comprised of more individuals from the MC and EMC with fewer individuals from the MVC, IC, and LRSC racial identity groups than expected. As such, more individuals than expected reported they valued their African American heritage and did not hold or internalize negative stereotypes about the African American community. They also reported less intense anti-White attitudes, a more positive Afrocentric identity, and a bicultural or multicultural perspective.

The P/G-IRR group was comprised of more individuals from the EMC, MC, and MVC with fewer individuals from the IC and LRSC racial identity groups than expected.

According to CRIS subscale scores for these groups, slightly more individuals in this group than expected devalued their African American culture in favor of a more Eurocentric worldview; however, these individuals did not report holding or internalizing negative stereotypes about African Americans. Similarly, these individuals reported that they held few anti-White attitudes, did not internalize an Afrocentric perspective, and reported neutral to moderate internalization of multicultural or bicultural perspectives.

Finally, the P/G-CONS group was comprised of more individuals from the EMC, MVC, and IC with fewer individuals from the MC and LRSC racial identity groups than expected. Although they reported neutral attitudes towards negative stereotypes about African Americans, more individuals in this group than expected indicated they devalued their African American culture in favor of a more Eurocentric worldview. These individuals also reported they internalized a positive Afrocentric perspective and bicultural or multicultural perspectives in which being African American is only one aspect of their identity.

Hypothesis 2b

Chi-squared analysis indicated the four PBQ/GAIAS groups (i.e., P/G-AM, P/G-AFF, P/G-IRR, and P/G-CONS) differed significantly in regards to SES group membership among African American mothers, χ^2 (6, n = 308) = 14.56, p < .05 (see Table 11, Appendix II). First, the P/G-AM group was comprised of more individuals from the middle and low SES and fewer individuals from the high SES group than expected. The score profiles for these SES groups indicated more individuals in this group than would be expected reported below-average to average ratings for income; personal and family education; and personal and family occupational prestige. Although

statistically significant, it is important to note the disparities between the expected and actual distribution of individuals from each SES group ranged from .7 to 5.1 participants (see Table 11, Appendix II).

Second, the P/G-AFF group was comprised of more individuals from the high SES group and fewer individuals from the middle and low SES groups than expected. Score profiles for these groups indicate fewer individuals than would be expected reported below-average to average ratings for income; personal and family education; and personal and family occupational prestige. In contrast, more individuals than would be expected reported higher than average ratings for income; personal and family education; and personal and family occupational prestige. However, the disparities between the expected and actual distribution of individuals from each SES group ranged from 1.6 to 6.3 participants (see Table 11, Appendix II).

Third, the P/G-IRR group was comprised of more individuals from the low SES group and fewer individuals from the middle and high SES groups than expected. Subscale scores indicated that more individuals than would be expected reported below average income; personal and family education; personal and family occupational prestige; and perceived wealth. Scores also indicated fewer individuals than would be expected reported average to higher than average income; personal and family education; personal and family occupational prestige; and perceived average to higher than average income; personal and family education; personal and family occupational prestige; and perceived wealth. The disparities between the expected and actual distribution of individuals from each SES group ranged from 4.1 to 10.5 participants (see Table 11, Appendix II).

Finally, the P/G-CONS group was comprised of more individuals from the middle and high SES groups with fewer individuals from the low SES group than expected.

Score profiles for these groups indicate that more individuals than would be expected reported average to higher than average income; personal and family education; personal and family occupational prestige; and perceived wealth. Moreover, fewer individuals than would be expected reported below average income; personal and family education; personal and family occupational prestige; and perceived wealth. The disparities between the expected and actual distribution of individuals from each SES group ranged from 1.3 to 6.5 participants (see Table 11, Appendix II).

Hypothesis 2c

Chi-squared analysis indicated the four PBQ/GAIAS groups (i.e., P/G-AM, P/G-AFF, P/G-IRR, and P/G-CONS) differed significantly in regards to members' selfreported African American racial identity attitudes and level of SES (CRISxSES), χ^2 (39, n = 308) = 139.17, p < .001(see Table 12, Appendix II). In spite of this, 51.8% of the cells had expected counts less than five, which indicates the chi-square approximation may not be reliable (Yates, Moore & McCabe, 1999, p. 734). Therefore, this result is not interpretable.

Section 3: Research Question 3

The aforementioned four PBQ/GAIAS groups formed by the *k*-means cluster analysis of the three PBQ subscales (FABP, PNL, and PR) and the GAIAS were retained for these analyses. Chi-squared analyses conducted with the PBQ/GAIAS groups determined if they varied significantly in regards to race, SES, or SESxRace group membership among the combined sample of African American and European American mothers.

Hypothesis 3a

Overall, chi-squared analysis indicated the four PBQ/GAIAS groups (i.e., P/G-AM, P/G-AFF, P/G-IRR, and P/G-CONS) did not differ significantly in regards to the distribution of African American and European American mothers, χ^2 (3, n = 370) = 7.16, p > .05 (see Table 13, Appendix II). Specifically, distribution of African American and European American four PBQ/GAIAS groups was not significantly different from the expected distribution.

Hypothesis 3b

Chi-squared analysis indicated the four PBQ/GAIAS groups (i.e., P/G-AM, P/G-AFF, P/G-IRR, and P/G-CONS) differed significantly in regards to SES among the combined sample of African American and European American mothers, χ^2 (6, n = 373) = 7.16, p < .01 (see Table 14, Appendix II). However, analysis with data from the European American mothers was not significant (χ^2 (6, n = 65) = 9.07, p = .17), suggesting that this finding is a result of the influence of data from the African American American mothers.

Hypothesis 3c

Chi-squared analysis indicated the four PBQ/GAIAS groups (i.e., P/G-AM, P/G-AFF, P/G-IRR, and P/G-CONS) differed significantly in regards to members' selfreported African American or European American race/ethnicity and level of SES (Race x SES). Results indicated that PBQ/GAIAS groups were significantly different in regards to Race x SES group composition, $\chi^2(15, n = 373) = 29.63, p < .05$ (see Table 15, Appendix II). However, 20.8% of the cells had expected counts less than five, which is just above the recommended cut-off for this assumption, indicating the chi-square approximation may not be reliable (Yates, Moore & McCabe, 1999, p. 734). Therefore, this result is not interpretable.

Post Hoc Analyses

A post hoc decision was made to investigate whether the four PBQ/GAIAS groups differed significantly in regards to five other nominal level demographic data. Specifically, I investigated differences by the recruitment methods, the mothers' relationship status, mothers' generational status, the children's age range, and whether the children lived with the mother. Chi-squared analyses with the European American sample indicated that there were no statistically significant differences between expected and actual distributions of PBQ/GAIAS groups based on recruitment method, $\chi^2(15, n = 65)$ = 12.24, p = .66; mothers' relationship status, $\chi^2(15, n = 65) = 16.58, p = .35$; mothers' generational status, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, p = .06; or children's age range, $\chi^2(15, n = 65) = 20.62$, $\chi^2(15, n = 65) = 20.62$, (65) = 22.18, p = .85. Although chi-squared analysis did indicate a statistically significant difference among PBQ/GAIAS groups based on whether the children lived with the mother, $\chi^2(15, n = 65) = 12.66, p = .049$, it is important to note that very few mothers reported that their children did not live with them (n = 3) or that only some of their children lived with them (n = 6). Subsequently, 66.7% of the cells had expected counts less than five, which is well above the recommended cut-off for this assumption, indicating the chi-square approximation may not be reliable (Yates et al., 1999, p. 734). Therefore, this result is not interpretable.

Similarly, chi-squared analyses with the African American sample indicated that there were no statistically significant differences between expected and actual

distributions of PBQ/GAIAS groups based on recruitment method, χ^2 (15, n = 308) = 13.35, p = .58; mothers' relationship status, χ^2 (15, n = 308) = 13.29, p = .58; or children's age range, χ^2 (15, n = 308) = 34.77, p = .78. Although chi-squared analysis did indicate a statistically significant difference among PBQ/GAIAS groups based on whether the children lived with the mother, χ^2 (15, n = 308) = 16.33, p = .01, and mothers' generational status, χ^2 (308, n = 308) = 24.74, p = .003, it is important to note that a large percentage of the cells had expected counts less than five (i.e., 33.3% and 50%, respectively), which is well above the recommended cut-offs for this assumption. Consequently, the chi-square approximations may not be reliable (Yates et al., 1999, p. 734). Therefore, these results are not interpretable.

CHAPTER 5

DISCUSSION

This study investigated the generalizability of the *Mothers Shouldn't Need Help Script* (Davis, 2009) in a sample of 308 African American and 65 European American mothers. After creating and evaluating the efficacy of various questionnaires, I used multiple regression to validate the generalizability of the *Mothers Shouldn't Need Help Script* (Davis, 2009) with the sample of African American mothers. I then used cluster and discriminant function analyses to create groups or clusters that best described participants and provided important information about the relationships between ethnicity, SES, African American racial identity attitudes, and parenting beliefs. Consequently, this discussion will describe the measure evaluation process and resulting participant groups; review the implications for parenting programs; and suggestions for future research.

Measurement Evaluation and Group Creation

Parenting Beliefs Questionnaire. To test the core study goals, a measure was created based on the *Mothers Shouldn't Need Help Script* (Davis, 2009) called the Parenting Beliefs Questionnaire (PBQ). This scale included subscales that evaluated beliefs about children's nature (e.g., "good" or "bad"); whether parents are responsible for how children behave; whether parenting is an innate ability; and how needing help with parenting is perceived. A pool of items were generated based on the qualitative study by Davis (2009) of parenting beliefs among a sample of high-risk African American mothers and were selected for inclusion in the measure based on ratings by experts in parent skills training and scale development. As this was a new measure, a

principal components analysis was conducted to 1) determine the underlying factor structure; 2) develop reliable subscales that provide useful information about the constructs of interest; and 3) reduce the number of variables for analysis (Fabrigar, Wegener, MacCallum, & Strahan, 1999). After conducting the principal components analysis, the Parenting Belief Questionnaire subscales accounted for 54.27% of the variance among items. Furthermore, internal consistency for the overall scale and each of the subscales was good.

Principal components analysis of the PBQ items supported three of the four hypothesized constructs from the *Mothers Shouldn't Need Help Script*: parenting as an innate ability (PBQ-Parenting Not Learned), perception of being accused of being a poor parent if asked to go to a parenting class (PBQ-Feel Accused of Bad Parenting), and parents' responsibility for children's behavior (PBQ-Parental Responsibility). The six items of the PBQ-Parenting Not Learned subscale appeared to indicate the degree to which parents agreed with the idea that parenting behavior is learned, that good parenting skills need to be learned, and that they can be improved upon. The five items of the PBQ-Feel Accused of Bad Parenting appeared to indicate that participants did not believe they needed parenting classes, that being asked to attend a parenting skills class has negative connotations, and that being asked to attend a parenting skills class may feel like an accusation of bad parenting. The three items of the PBQ-Parental Responsibility appear to indicate that participants believe parents are responsible for children's misbehavior.

Contrary to hypotheses, the fourth construct, beliefs about children's nature, was not evident in the data. It is possible that the questions designed to measure this construct, as written, did not accurately measure it. The negative and near zero correlations with the

total score for four of the six items designed to measure this construct offers support for this hypothesis. Similarly, although the data supported three of the four constructs, the retained questions did not all load on the subscales for which they were designed. Specifically, two of the questions designed to measure beliefs about children's nature loaded on the other subscales (i.e., *Children must be taught how to behave well; Children will grow up behaving well if they are not taught how to misbehave*). Alternately, the construct may not exist as hypothesized. It is possible that this construct did not replicate in the current study because the concept of children's nature as "good" may be an artifact of the population in Davis' (2009). Specifically, all participants were in an addiction treatment program with a focus on parenting may have held the view of children as inherently good as a result of the interventions to which they had been exposed.

Socioeconomic Status. In addition to creating a measure of parenting beliefs, I measured socioeconomic status (SES) by conducting a cluster analysis on the four most commonly used, primary indicators of SES: educational attainment, occupational prestige, income, and perceived wealth (Duncan & Magnuson, 2003; Klebanov, & Crane, 1998; Phillips et al., 1998; Rindfleisch et al., 1997: Twenge & Campbell, 2002). Cluster analysis using Ward's method suggested that a three-cluster solution was optimal, resulting in Higher SES, Middle SES, and Lower SES groups.

Investigation of the z-scores for the Higher SES group indicated that these individuals generally reported higher weighted income relative to their level of education and occupational prestige (i.e., BSMSS). Conversely, they tended to reported lower weighted perceived wealth in comparison to weighted income and level of education and occupational prestige (i.e., BSMSS). In other words, the individuals in this group

perceived themselves as less well off than their level of education and occupational prestige (i.e., BSMSS) and weighted income indicated. Conversely, individuals in the Middle SES group reported relatively similar average levels of education and occupational prestige (i.e., BSMSS) and income, whereas they tended to perceive themselves as wealthier than their level of education and occupational prestige (i.e., BSMSS) and income indicated. Finally, individuals in the Lower SES group reported lower weighted income in comparison to their level of education and occupational prestige (i.e., BSMSS). These individuals reported that they perceived themselves as having less wealth relative to what their weighted income and level of education and occupational prestige (i.e., BSMSS) indicated.

Racial Identity Attitudes. African American racial identity attitudes were measured using the CRIS (Vandiver et al., 2000; Vandiver et al., 2002; Worrell et al., 2004). A five-cluster solution was determined optimal, which is consistent with previous research (Whittaker & Neville, 2011; Worrell et al., 2006). Four of the five cluster profiles replicated the descriptions of groups that emerged in previous research (Whittaker & Neville, 2011; Worrell et al., 2006) whereas one group profile was unique to this study. This is significant given that the current sample is unique as it incorporates data from a potentially nationwide sample of mothers with diverse educational, age, and socioeconomic demographics. Therefore, the following racial identity attitude profiles may generalize beyond the previous research, as those samples were drawn exclusively from college campuses.

Individuals in the Emerging Multiculturalist group reported low scores on all three of the PreEncounter subscales, which indicated they value African American

culture and did not report negative stereotypes about the African American community. They also did not report strong anti-White attitudes. Although individuals in this group tended towards internalizing a positive Afrocentric perspective, they reported a stronger bicultural or multicultural perspective. This profile is consistent with individuals who are moving out of the Immersion-Emersion stage of Cross's theory and into the Multiculturalist stage.

The Multiculturalist group profile in this study is similar to that from previous research with three samples of college students from primarily White institutions (Whittaker & Neville, 2011; Worrell et al., 2006). Although this sample demonstrated slightly higher endorsement of a Eurocentric worldview, they rejected negative stereotypes about both African American and Whites. Individuals in this group did not endorse a primarily Afrocentric perspective, rather, they indicated internalization of a positive Afrocentric identity and a bicultural or multicultural perspective.

Although individuals in the Miseducated Variant group indicated they held few anti-White attitudes and some internalization of a positive Afrocentric identity and multicultural perspective, negative stereotypes of African Americans most strongly influenced their racial identity. This profile describes individuals who most strongly endorse PreEncounter attitudes that devalue African American values, actions, and culture in favor of a Eurocentric worldview. Moreover, they hold generally negative stereotypes, which they internalize, about the African American community that reflect miseducation about the roles of Africa and African Americans. This score profile is consistent with the Miseducated Variant described by Worrell et al. (2006) in a sample of college students from a primarily White institution.

Although the score profile for the Immersion group indicated that these individuals see themselves as African American, they continued to endorse assimilation, negative stereotypes of African Americans, miseducation about African heritage, selfhatred, and strong anti-White attitudes. This score profile is consistent with Cross's Immersion-Emersion stage, an intense period of transition during which the person commits to developing his or her new Afrocentric identity stage of nigrescence. It also is consistent with the Immersion profiles previous described in the literature (Whittaker & Neville, 2011; Worrell et al., 2006).

Individuals in the Low Race Saliency group endorsed a profile that indicated that race is not a salient factor for them. They did not report strong attitudes against African Americans or Whites, and did not endorse multiculturalism. Similar to Worrell et al. (2006), they appeared to avoid considering issues of race. This profile, one in which race is not a salient factor, is consistent with previous research (Whittaker & Neville, 2011; Worrell et al., 2006)

RQ1: Validation of the Mothers Shouldn't Need Help Script

After creating and evaluating study measures to describe groups of participants, a multiple linear regression was conducted to explore the first study hypothesis: whether African American mothers in the current study endorsed similar beliefs to those outlined in Davis' (2009) *Mothers Shouldn't Need Help Scrip*. Analysis of data from African American participants indicated that stronger feelings of being accused of being a bad parent if asked to take a parenting class (PBQ-Feel Accused of Bad Parenting) could be predicted by stronger beliefs that parenting skills are an innate ability (PBQ-Parenting Not Learned) and that parents are responsible for their children's misbehaviors (PBQ-

Parental Responsibility). Additionally, mothers' negative attitudes toward authority figures (GAIAS) predicted stronger feelings of being accused of being a bad parent if asked to take parenting classes (PBQ-Feel Accused of Bad Parenting). This model explained 18.51% of the variance in scores on the PBQ-Feel Accused of Bad Parenting and is similar to that proposed in the *Mothers Shouldn't Need Help Script*.

These findings support the grounded theory derived from Davis' (2009) qualitative study. Specifically, Davis' (2009) study found that African American mothers reported that they are responsible for providing rules and structure for their children's benefit. Therefore, the mother may perceive herself at fault when children do not behave appropriately or the parent needs help with parenting skills (Davis, 2009), which parallels the construct measured by the PBQ-Parental Responsibility subscale in the current study. Unfortunately, overt parenting skills instruction did not seem to be an inherent part of the conscious socialization of the women in Davis' study, potentially leading the mothers to believe that parenting skills are inherent. The PBQ-Parenting Not Learned subscale, which measures whether participants believe that parenting skills are innate rather than learned, mirrors these concepts and may contribute to the mother feeling she is lacking as a parent and is not inherently capable of teaching or raising her child correctly (Davis, 2009). Moreover, women in Davis' study had a history of negative experiences with and resistance to institutional authority figures, which may also be influenced by the history of oppression of the African American community in the U.S. (Mays, 1986), a concept measured by the GAIAS in the current study. Subsequently, feeling responsible for children's misbehavior, the belief that parenting skills are innate, and problems with authority figures can trigger feelings that the person asking the mother to attend a

parenting skills class may be accusing the mother of being a bad parent (PBQ-Feel Accused of Bad Parenting). Davis (2009) named this process the *Mothers Shouldn't Need Help Script*.

Clinical Implications. Given these data, intervening in the activation of the *Mothers Shouldn't Need Help Script* is likely critical to recruitment of African American mothers for parenting skills programs because these beliefs can affect reactions to and acceptance of requests to attend parenting skills classes. Moreover, even if mandated to attend such classes, these beliefs and reactions may preclude the mother from being receptive to the skills taught in the class. It is hoped that this information will be useful in the design of culturally competent parenting skills programs for the minority, at-risk populations who currently underutilize these programs.

Although more research is needed in this area, there are steps and approaches that Davis (2009) suggested may allay the activation of the *Mothers Shouldn't Need Help Script*. For example, authority figures should limit accusations of poor parenting and approach the parent with the motivation of caring about her and her children's wellbeing. Additionally, suggestions to attend a parenting class by someone whom the mother trusts may also facilitate recruitment. Using terminology that suggests the parent attend a class with someone as a collaborative effort instead of an accusatory, "you need to take" phrasing may also assist in short circuiting the script.

Alternately, removing the concept of the parenting class facilitator as an "authority figure" entirely is another potential option. For example, using the term "peer mentoring group" could also decrease the hierarchical aspect inherent in the term "parenting skills class." Another potential option is to employ a community of learners

approach (Rogoff, 1994). This approach involves abandoning the concept of transmitting knowledge from an expert in favor of using a sociocultural approach to learning in which individuals participate in sharing information with each other.

Moreover, intensive effort should be made to provide psychoeducation to mothers to counter the belief that parenting skills are innate abilities. Normalizing the need to learn parenting skills may short-circuit the self-blame and subsequent resistance to learning the skills taught in the classes. However, it is important to utilize accurate empathy when taking this approach as to not unduly trivialize parental responsibility when engaged in parent skills training, particularly among individuals who may have been mandated to attend training due to substantial neglectful or abusive parenting behaviors.

Post Hoc Analysis with European American Mothers. Post hoc analysis of the Mothers Shouldn't Need Help Script with the sample of European American participants indicated that these data did not fit the model. Specifically, beliefs that parenting skills are an innate ability (PBQ-Parenting Not Learned) and that parents are responsible for children's misbehaviors (PBQ-Parental Responsibility) did not predict feelings of being accused of being a bad parent if asked to take a parenting class (PBQ-Feel Accused of Bad Parenting). Additionally, mothers' attitudes toward authority figures (GAIAS) also did not predict feeling accused of being a bad parent (PBQ-Feel Accused of Bad Parenting). Given that this model was supported with the sample of African American but not European American mothers, program designers may consider designing different curriculum and recruitment methods for these two groups.

However, it is important to note that the data violated some of the assumptions inherent in performing multiple linear regression; therefore, the results should be interpreted with care. Although the sample size (N = 65) for European American participants met the minimal 5:1 ratio of participants to independent variables suggested for multiple regression, it did not meet the same preferred ratio of 50:1 as did the African American sample. Thus, it is possible the sample size did not allow sufficient power to detect relationships between the variables.

RQ2 and RQ3: Patterns of Parenting Beliefs

Responses on the PBQ subscales (Feel Accused of Bad Parenting, Parenting Not Learned, and Parental Responsibility) and the GAIAS were analyzed using cluster analyses to detect underlying patterns in parenting beliefs and attitudes toward authority figures. Chi-squared analyses with the resulting PBQ/GAIAS groups indicated they varied significantly in regards to CRIS group membership, SES group membership, and CRISxSES group membership among this sample of African American mothers.

PBQ/GAIAS Groups. Cluster analysis using Ward's method suggested four unique score profiles, which were supported by cross validation using discriminant function analysis. Specifically, individuals in the PBQ/GAIAS Ambivalent group generally did not feel strongly about any of the constructs measured. They reported relatively neutral feelings about being asked to attend parenting classes (PBQ-Feel Accused of Bad Parenting), that parenting skills can be learned (PBQ-Parenting Not Learned), and attitudes towards authority figures (GAIAS). Moreover, these individuals also endorsed ambivalence in views about whether parents are responsible for children's misbehavior (PBQ-Parental Responsibility).

Conversely, individuals in the PBQ/GAIAS Affirmative group appeared to hold positive views about learning parenting skills and towards authority figures, whereas they did not feel strongly about parental responsibility for children's misbehavior. They indicated they would not feel accused of bad parenting if asked to attend parenting classes (PBQ-Feel Accused of Bad Parenting). They also reported believing that parenting skills can be learned (PBQ-Parenting Not Learned). Individuals in this group reported the most positive attitudes towards authority figures (GAIAS) of all four groups. In contrast, these individuals reported relatively neutral views about whether parents are responsible for children's misbehavior (PBQ-Parental Responsibility).

Additionally, individuals in the PBQ/GAIAS Irresponsible group appear to hold positive views toward learning parenting skills but are ambivalent about parental accountability and authority. Similar to the PBQ/GAIAS Affirmative group, they reported they would not feel accused of bad parenting if asked to attend parenting classes (PBQ-Feel Accused of Bad Parenting), that they believe parenting skills can be learned (PBQ-Parenting Not Learned), and neutral views about whether parents are responsible for children's misbehavior (PBQ-Parental Responsibility). This group indicated ambivalent beliefs similar to those of the PBQ/GAIAS Ambivalent group towards authority figures (GAIAS). In sum, although these individuals reported they believe parenting skills can be learned, their ratings also indicate avoidance in accepting responsibility for doing so.

Finally, individuals in the PBQ/GAIAS Conscientiousness group appear to take responsibility for parenting. They reported that they would feel negatively if they were asked to attend parenting classes (PBQ-Feel Accused of Bad Parenting) because they

believe parenting skills can be learned (PBQ-Parenting Not Learned) and that they are responsible for children's misbehavior (PBQ-Parental Responsibility). Moreover, they reported slightly more positive attitudes toward authority figures (GAIAS).

Clinical Implications. Program designers and facilitators may find the response patterns on the Parenting Belief Questionnaire useful in addressing issues specific to the PBQ/GAIAS group composition of their parenting skills classes. For example, classes in which a significant number of participants endorse membership in the PBQ/GAIAS Ambivalent group may benefit from emphasizing information designed to decrease their ambivalence towards the constructs measured by the Parenting Beliefs Questionnaire. Specifically, class facilitators may stress the utility of parental involvement in affecting child behavior to increase parental feelings of efficacy in this area, psychoeducation normalizing the necessity of learning parenting skills, and deemphasizing the facilitator's position of authority. In contrast, classes comprised primarily of individuals from the Affirmative group already hold positive views towards learning parenting skills and authority figures but would benefit from psychoeducation normalizing the necessity of learning parenting skills. Similarly, classes that consist of a high number of individuals from the Irresponsible group may benefit from psychoeducation about how parental involvement affects child behavior and deemphasizing the facilitator's position of authority. Additionally, classes comprised of higher numbers of individuals from the Conscientiousness group may benefit from positive reinforcement designed to decrease their tendency to feel accused of poor parenting because they were asked to attend a parenting skills class.

Distribution of CRIS, SES, and Ethnicity Groups among PBQ/GAIAS groups. Chi-squared analysis with the sample of African American mothers indicated the four PBQ/GAIAS groups (i.e., PBQ/GAIAS Ambivalent, PBQ/GAIAS Affirmative, PBQ/GAIAS Irresponsible, and PBQ/GAIAS Conscientiousness) were significantly different in regards to CRIS and SES group membership among African American mothers. Similarly, chi-squared analysis indicated that the actual distribution of SES group membership among PBQ/GAIAS groups varied significantly from the expected distribution for the combined sample of African American and European American mothers. It is possible that this finding is due to the inclusion of the sample of African American mothers, for whom the distribution of SES groups was statistically significant, as chi-squared analysis with the sample of European American mothers was not significant.

Although chi-squared analysis indicated the four PBQ/GAIAS groups differed significantly in regards to members' CRIS score profile by SES (CRISxSES) and members' self-reported ethnicity by SES (RacexSES), the excessive number of cells with expected counts less than five in each of these analyses render these results unexplainable. Chi-squared analysis conducted with the PBQ/GAIAS groups with data from the combined sample of African-and European American mothers indicated ethnicity (i.e., African American or European American) was not related to specific patterns of responses on measures of parenting beliefs found in the *Mothers Shouldn't Need Help Script*. Although this chi-square analysis conflicts with the results of the multiple regressions with both samples, it is important to note that the relationship between the parenting belief subscales and attitudes towards authority found among

African American mothers, but not among European American mothers, was a linear relationship. Therefore, the data may not support a categorical approach, such as the chi-squared analysis with PBQ/GAIAS groups.

Clinical Implications. Although statistically significant, these findings did not yield clinically useful information as the PBQ/GAIAS groups were highly variable in regards to CRIS group and SES group membership. Similarly, the statistically significant finding for SES among the combined sample lacks practical application as none of the PBQ/GAIAS groups was dominated by membership in a specific SES group. Therefore, it is not feasible to base the design of parenting skills programs to address specific score profiles of the PBQ/GAIAS groups for different CRIS or SES groups. This is consistent with previous research that indicates there is frequently more intra- than inter-group variation (e.g., Matsumoto, Grissom, & Dinnel, 2001).

Limitations and Future Directions

Limitations. Like all research, this study is not without limitations. One of the key limitations in this study includes potential biases in participant selection. Specifically, as a number of the recruitment methods were conducted online, there is a strong potential that individuals who lack computer literacy skills were not able to participate in this study as they were not made aware of the telephone data collection option. A second key limitation involves the high number of incomplete surveys (N = 184), which may be due in part to the length of the survey. Of the 679 individuals who initiated the survey, only 373 mothers completed all measures. It is possible that the opinions of the individuals who completed only some of the measures were significantly different from those of the individuals who completed all survey measures.

A third limitation is the use of SurveyMonkey Audience to collect responses from individuals in their database. Although SurveyMonkey limits the number of surveys they send to these individuals, it is possible that some of the survey respondents misrepresent themselves in order to complete higher numbers of surveys so that they can enter the \$100 Instant Win Sweepstakes Game at the end of the survey. For the same reason it is also possible that respondents recruited via this method may not diligently consider their responses. However, these risks also are inherent in the other five recruitment methods. Another potential difference between the sample recruited through the SurveyMonkey site and the other five recruitment methods is that the other recruitment methods allow individuals who do not have access to, or who are not computer literate, to participate. SurveyMonkey respondents all have access to computers and are computer literate as demonstrated by their inclusion in SurveyMonkey's database. Therefore, data collected via this method may yield a higher ratio of upper income, more highly educated individuals than data collected via other methods.

The statistical analyses performed in the study are a potential fourth limitation of this study. Specifically, although statistically significant, the chi-squared analyses of the PBQ/GAIAS group composition in regard to racial identity attitudes, ethnicity, and SES imparts little clinically useful information; however, membership in the PBQ/GAIAS group does provide potentially useful information if program designers or class facilitators measure these constructs and profile class members prior to class instruction. Moreover, the number of analyses at times may detract from the clinically useful information contained in the data.

A fifth limitation of the study is the lack of information regarding the relationship and involvement of fathers in the parenting process (e.g., co-parenting). For example, the degree to which both parents are involved in parenting activities may influence parenting beliefs. Therefore, future research should investigate the roles of fathers in parenting, particularly the division of parenting activities and responsibilities between mothers and fathers. Additionally, the parenting beliefs of fathers and the factors that may inhibit them from participating in parenting skills classes may differ from those of mothers. This difference may be particularly relevant for parenting skills programs specifically developed for fathers, such as Fathers Now (Asirvatham, 2011), and programs designed to involve both mothers and fathers in their curriculum (e.g., the Incredible Years: Webster-Stratton & Hammond, 1997; Webster-Stratton & Taylor, 2001)

Future Directions. Despite these limitations, this study has several strengths that will help guide future research and program creation. First, this research will help clinicians and researchers understand the beliefs and needs of African American mothers. Specifically, the current research supports the *Mothers Shouldn't Need Help Script* among a diverse sample of African American mothers; provides a new measure to evaluate key constructs defined in the script; and outlines participant profiles that describe mothers parenting beliefs. This information can be used to conceptualize, develop, and implement culturally competent parenting programs that will be more palatable and potentially more effective than those programs currently available to at-risk mothers. Given that this was not a convenience sample of college students, the results of this study may generalize to a greater proportion of the population, which some scholars

note as a limitation of many research studies in the social sciences in general, and psychology in particular (Henrich, Heine, & Norenzayan, 2010).

Second, although the current model was informative, it explained relatively little of the variance in the model. Further research is necessary to explicate other factors that contribute to mothers' feeling accused of poor parenting when they are approached for recruitment for parenting skills classes. Additional research is also warranted to investigate other deterrents to recruitment and retention for parenting skills classes.

Third, research is needed to investigate the utility of developing parenting skills programs designed to deactivate the *Mothers' Shouldn't Need Help Script*, both in the recruitment phase and in the curriculum. As the *Mothers Shouldn't Need Help Script* was not supported among the sample of European American mothers, more research is necessary to investigate further the generalizability of the script to European American mothers and to other populations.

Fourth, although four of the five CRIS profiles described in the current study replicate previous research (Whittaker & Neville, 2011; Worrell et al., 2006), further research is warranted to investigate the novel score profile, Emerging Multiculturalist, as it is possible that this score profile is unique to the current sample (i.e., African American mothers). Moreover, further research with a more diverse sample is necessary to validate the four score profiles common to this study and previous research (Whittaker & Neville, 2011; Worrell et al., 2006).

Finally, additional research regarding the measurement of socioeconomic status is warranted. Although the innovative methods used in the current study allowed for an objective, data driven determination for the levels of socioeconomic status, they warrant

further validation with a larger, more diverse sample. Moreover, the disparity between the reports of individuals in the Middle SES group regarding level of perceived wealth and those of the Higher and Lower SES groups should be investigated further. Specifically, individuals in the Middle SES group tended to perceive their wealth as higher than indicated by their income, education, and occupational prestige ratings; whereas individuals in the Higher and Lower SES groups perceived their wealth as lower than indicated by their income, education, and occupational prestige ratings. Additionally, further research is warranted on how education and wealth affect parenting beliefs.

APPENDIX I: DEMOGRAPHIC FORM

Demographic Questionnaire

Please answer the following questions as best as you can.

- 1. What is your current age in years?
- 2. What is your relationship status?

🗆 Single,	□ In a	□ Divorced	□ Married	□ Widowed	□ Other
never	committed				
married	relationship				

- 3. How many children do you have?
- 4. What age(s) is/are your child(ren)?
- 5. Do they live with you? \Box Yes \Box Some do \Box No

6. If not, what ages were they when they left your care?

- 7. What is your race? Please check all that apply:
 - □ Asian □ Black □ Native American □ White □ Other_____
- 8. Is English your first language? □ Yes □ No

If no, what was your first language?

- 9. Generational Status. Check the generation that best applies to you:
 - □ First generation: You were born in another country but live in the USA
 - □ Second generation: You were born in the USA but one or both of your parents were born in another country.
 - □ Third generation: You and both your parents were born in the USA and all grandparents were born in another country.
 - □ Fourth generation: You and your parents were born in the USA and at least one grandparent was born in another country with the remainder born in the USA
 - □ Fifth or greater generation: You and your parents were born in the USA and all grandparents were born in the USA.

10. What is your annual household income?

□ <20,000	□ 40,000 to 49,999	□ 70,000 to 79,999
□ 20,000 to 29,999	□ 50,000 to 59,999	□ 80,000 to 89,999
□ 30,000 to 39,999	□ 60,000 to 69,999	$\square > 90,000$ per year

11. What is your parents' approximate yearly household income?

□ <20,000	□ 40,000 to 49,999	□ 70,000 to 79,999
□ 20,000 to 29,999	□ 50,000 to 59,999	□ 80,000 to 89,999
□ 30,000 to 39,999	□ 60,000 to 69,999	$\square > 90,000$ per year

12. What was your family wealth compared to the average American family at age 16? with 1 = lowest and 9 = highest?

1 2 3 4 5 6 7 8 9

- 13. What is your wealth compared to the average American family now? with 1 = lowest and 9 = highest?
 - $1 \quad 2 \quad 3 \quad 4 \quad 5 \quad 6 \quad 7 \quad 8 \quad 9$
- 14. What is your ethnic background? Please check all that apply:
 - □ African (e.g., ethnic background is African)
 - □ African American (e.g., ethnic background is African *and* American)
 - □ Asian American (e.g., ethnic background is Chinese, Japanese, Korean, Vietnamese, Thai, etc.)
 - □ Black
 - □ Euro-American (e.g., ethnic background is Irish, English, Scottish, French, Italian, etc.)
 - Middle Eastern American (e.g., ethnic background is Iranian, Iraqi, Egyptian, Saudi, etc.)
 - Native American. Please specify which tribe if you belong to one:
 - □ Pacific Islander (e.g., ethnic background is Hawaiian, Tongan, Pilipino)
 - Spanish/Hispanic/Latino (e.g., ethnic background is Mexican, South American, Cuban, Puerto Rican)
 - □ West Indian/Caribbean Black
 - □ Other: _____

APPENDIX II: TABLES

Table 1

Constructs, Items, and Average Ratings for Parental Beliefs Questionnaire

Construct	Question(s)	Average Rating
Parenting as an inherent ability.	Some people just know by instinct how to be good parents. No one is born a good parent, they must learn how to be a	4.60 ^t
innerent uenity.	good parent. ^a	6.00 ^b
	Parenting is learned. ^a	4.00 ^t
	People are born knowing how to be parents.	3.20
	Good parents are born, not made.	4.00 ^t
	Anyone can learn to be a good parent. ^a	6.00 ^t
	Just giving birth means you know how to be a parent.	3.40
	Mothers should just know how to take care of their children.	3.40
	I think parenting skills need to be learned. ^a	5.00 ^t
	I think most people naturally know how to parent.	3.80
Perception of	Even good parents would benefit from going to a parenting	
being accused of being a poor	class. ^a I would feel like a bad parent if I were asked to go to a	4.80
parent if asked	parenting class.	4.60
to go to a parenting class.	I, like most parents, could learn new parenting skills by taking a parenting class. ^a	4.40
parenting class.	Most parents can learn new parenting skills by taking a	4.40
	parenting class. ^a	5.00 ¹
	I already know everything I need to know about parenting.	5.00 ¹
	Only people who are bad parents need to go to parenting	5.00
	classes.	5.00
	Only abusive or neglectful parents need to go to parenting	5.00
	classes.	4.00
	If someone asked me to go to a parenting class I would feel	1.00
	like that person thought I was a bad parent.	6.40 ^t
Perspective on	Children are born basically "good."	5.20 ¹
children's	Children's basic nature is good.	4.40
nature	Children are innocent when they are born.	4.40
	Children will grow up behaving well if they are not taught	
	how to misbehave.	5.20 ^t
	Children naturally want to be good.	4.80
	Children will misbehave if given the chance. ^a	5.80
	Children will be bad because it is in their nature to be bad. ^a	5.00
	Children are born "bad." ^a	4.25
	Children must be taught how to behave well. ^a	6.25

Note. ^a Questions that are reversed scored. ^b Questions selected for inclusion in the questionnaire.

Table 1 (cont)

Construct to be measured	Question(s) to measure construct	Average Rating
Parental	It is the parents' fault if children misbehave.	5.20 ^b
responsibility for	It is the parents' fault if children behave badly.	5.00 ^b
children's behavior	Parents are to blame for their children's bad behavior.	5.00 ^b
	Children are naughty because their parents did not do a	
	good job of raising them.	4.60
	Children behave properly because of their parents. ^a	4.20
	Children behave properly because their parents taught	
	them to. ^a	6.00 ^b
	Children will misbehave no matter what their parents say	
	or do. ^a	5.80 ^b
	Children learn to be "good" or "bad" from their parents.	5.40 ^b
	It is my fault if my child misbehaves.	4.00
	It is my fault if my child behaves badly.	4.60
	I am to blame if my child is naughty.	3.60
	I am responsible for my child behaving well. ^a	4.40
	My child is good because I taught him/her to be good. ^a	4.60

Constructs, Items, and Average Ratings for Parental Beliefs Questionnaire

Note. ^a Questions that are reversed scored. ^b Questions selected for inclusion in the questionnaire

Parenting Beliefs Questionnaire Item Descriptive Statistics

				Afri	can	Europ	bean
	Item	Corrected	Alpha if	Amer	ican	Amer	ican
	item	Item-Total	Item	(n = 3)	308)	(<i>n</i> =	65)
		Correlation ^b	Deleted ^b	М	SD	М	SD
1.	Children are born basically "good."	09	.63	7.28	2.05	7.08	2.07
2.	It is the parents' fault if children misbehave.	.17	.60	5.37	2.11	5.52	1.92
3.	Some people just know by instinct how to be good parents.	.03	.61	6.15	2.16	5.88	2.21
4.	Even good parents would benefit from going to a parenting class. ^a	.35	.58	2.60	1.76	2.94	1.84
5.	Children will grow up behaving well if they are not taught how to misbehav	ve26	.59	4.74	2.33	4.62	2.38
6.	It is the parents' fault if children behave badly.	.30	.58	4.93	2.25	5.75	1.93
5 7.	No one is born a good parent, they must learn how to be a good parent. ^a	.19	.60	3.03	2.12	4.02	2.23
8.	I would feel like a bad parent if I were asked to go to a parenting class.	.47	.56	3.84	2.55	4.38	2.10
9.	Children naturally want to be good.	.05	.61	6.18	2.03	6.25	1.98
10.	Parents are to blame for their children's bad behavior.	.31	.58	5.11	2.25	5.48	1.90
11.	Parenting is learned. ^a	.21	.59	2.66	1.62	3.54	1.77
12.	Most parents can learn new parenting skills by taking a parenting class. ^a	.32	.58	2.85	1.88	3.14	1.85
13.	Children will misbehave if given the chance. ^a	.09	.61	3.60	2.01	4.52	1.78
14.	Children behave properly because their parents taught them to. ^a	.05	.61	2.99	1.66	3.25	1.68
15.	Good parents are born, not made.	.33	.58	3.69	2.15	3.83	1.82
16.	I already know everything I need to know about parenting.	.42	.56	3.42	2.37	3.02	2.14
17.	Children will be bad because it is in their nature to be bad. ^a	17	.64	6.16	2.35	6.63	2.12
18.	Children will misbehave no matter what their parents say or do. ^a	05	.63	5.50	2.37	5.78	2.32
19.	Anyone can learn to be a good parent. ^a	.06	.61	3.25	2.18	3.74	2.14
20.	Only people who are bad parents need to go to parenting classes.	.53	.55	2.91	2.27	3.23	2.06

Note. Items with Item-Total Correlations in boldface excluded from all further analyses. ^a Reversed scored items. ^b Mean Deviated Combined Sample.

Table 2 (cont)

Parenting Beliefs Questionnaire Item Descriptive Statistics

Item	Corrected Item-Total	Alpha if Item			Europ Amer $(n = 0)$	rican
	Correlation ^b	Deleted ^b	M	SD	M	SD
1. Children must be taught how to behave well. ^a	.18	.60	2.56	1.73	3.00	1.40
2. Children learn to be "good" or "bad" from their parents.	.01	.62	6.28	2.01	6.29	1.63
 23. I think parenting skills need to be learned.^a 24. If someone asked me to go to a parenting class I would feel like that persor 	.27	.59	3.22	1.85	3.62	1.67
thought I was a bad parent.	.33	.58	4.29	2.52	4.66	2.10

Note. Items with Item-Total Correlations in boldface excluded from all further analyses. ^a Reversed scored items. ^b Mean Deviated Combined Sample.

	Itaan				
	Item	1	Factor 2	3	h ²
11.	Parenting is learned. ^a	.75	01	09	.57
23.	I think parenting skills need to be learned. ^a	.75	.02	04	.56
21.	Children must be taught how to behave well. ^a	.70	.03	07	.49
7.	No one is born a good parent, they must learn how to be a good parent. ^a	.67	02	12	.47
12.	Most parents can learn new parenting skills by taking a parenting class. ^a	.55	.30	02	.40
4.	Even good parents would benefit from going to a parenting class. ^a	.51	.38	01	.40
8.	I would feel like a bad parent if I were asked to go to a parenting class.	.02	.83	.08	.69
24.	If someone asked me to go to a parenting class I would feel like that person thought I was a bad parent.	05	.82	10	.69
20.	Only people who are bad parents need to go to parenting classes.	.21	.76	.21	.67
16.	I already know everything I need to know about parenting.	.15	.63	.28	.50
15.	Good parents are born, not made.	.28	.40	.29	.32
6.	It is the parents' fault if children behave badly.	14	.08	.85	.76
10.	Parents are to blame for their children's bad behavior.	16	.14	.80	.69
2.	It is the parents' fault if children misbehave.	22	.00	.75	.61
5.	Children will grow up behaving well if they are not taught how to misbehave. ^b	.05	.18	.55	.34

Note. Principal Component Analysis with an Orthogonal Rotation (Quartimax with Kaiser Normalization). Salient factor pattern coefficients >.40 are in boldface. Factor 1 = Behavior is not Learned. Factor 2 = Feel Accused of Bad Parenting. Factor 3 = Parental Responsibility. $h^2 =$ communality. ^a Reversed scored items. ^b Deleted in Reliability Analysis

Scale	Cronbach's Alpha		Item	Cronbach's Alpha if Item Deleted
Feel Accused of Bad Parenting	.79	16.	I already know everything I need to know about parenting.	.75
(FABP)		8.	I would feel like a bad parent if I were asked to go to a parenting class.	.73
		20.	Only people who are bad parents need to go to parenting classes.	.72
		24.	If someone asked me to go to a parenting class I would feel like that person thought I was a bad parent.	.75
		15.	-	79
Parental Responsibility	.76	6.	It is the parents' fault if children behave badly.	.60
(PR)		10.	Parents are to blame for their children's bad behavior.	.66
		2.	It is the parents' fault if children misbehave.	.71
		5.	Children will grow up behaving well if they are not taught how to misbehave.	.82
Parenting Not	.76	11.	Parenting is learned. ^a	.72
Learned (PNL)		21.	Children must be taught how to behave well. ^a	.73
		23.	I think parenting skills need to be learned. ^a	.70
		7.	No one is born a good parent, they must learn how to be a good parent. ^a	.74
		12.	Most parents can learn new parenting skills by taking a parenting class. ^a	.73
		4.	Even good parents would benefit from going to a parenting class. ^a	.74

Parenting Beliefs Questionnaire Subscale Descriptive Statistics

Note. Variable in boldface excluded from further analyses. Mean Deviated Combined Sample. ^a Reversed scored items.

Items and Average Ratings for Social Workers Subscale of GAIAS

Question(s) to measure attitude toward social workers	Average Rating				
Social workers try to help parents and children.					
Social workers treat families fairly.	5.75 ^b				
Social workers do everything they can to keep families together.	6.25 ^b				
As a rule, social workers do things that are in the best interests of families.	5.75				
Social workers should stay out of private family business. ^a	3.75				
Social workers try to break up families. ^a	5.50 ^b				
Social workers are biased against some people. ^a	5.00				
Social workers use their power to carry out their own agendas. ^a	5.50 ^b				

Note. ^{*a*} Questions that are reversed scored. ^{*b*} Questions selected for inclusion in the questionnaire.

Multiple Regression Summary of Correlations, Means, and Standard Deviations for IV

and DV for African American Participants (n = 308)

Variable	1	2	3	4	М	SD
1. Feel Accused of Bad Parenting (FABP)					3.63	1.77
2. Parenting is not Learned (PNL)	.27***				2.82	1.24
3. Parental Responsibility (PR)	.23***	22***			5.14	1.89
4. GAIAS	23***	16**	07		5.55	1.00

Note. ***p* < .01, 1-tailed. ****p* < .001, 1-tailed.

Table 7

Summary of Simple Regression Analysis Mothers Shouldn't Need Help Script for African

American Participants (n = 308)

		Feel Accused of Bad Parenting (FABP)					
Variable		В	SE B	β	t	95% CI	
(Constant)		2.61	.70	_	3.76***	[1.24, 3.98]	
Parenting is not Learn (PNL)		.44	.08	.31	5.66***	[.28, .59]	
Parental Responsibility (PR)		.27	.05	.29	5.36***	[.17, .37]	
GAIAS		29	.09	16	-3.08**	[47,10]	
R^2	.19						
<i>F</i> (3,304)	23.02**						

Note. ***p* < .01. ****p* < .001.

Multiple Regression Summary of Correlations, Means, and Standard Deviations for IV

and DV for European American Participants (n = 65)

Variable	1	2	3	4	М	SD
1. Feel Accused of Bad Parenting (FABP)					3.82	1.41
2. Parenting is not Learn (PNL)	.21*	¢			3.37	1.22
3. Parental Responsibility (PR)	.14	26*			5.58	1.68
4. GAIAS	09	26*	09		5.81	1.03

Note. **p* < .05, 1-tailed.

Table 9

Summary of Simple Regression Analyses for Mothers Shouldn't Need Help Script for

European American Participants (n = 65)

		Feel Accused of Bad Parenting (FABP)				
Variable		В	SE B	β	t	95% CI
(Constant)		1.93	1.55		1.24	[-1.18, 5.04]
Parenting is not Learn (PNL)		.30	.15	.26	1.93	[01, .60]
Parental Responsibility (PR)		.17	.11	.21	1.59	[04, .39]
GAIAS		01	.18	01	06	[36, .34]
R^2	.08					
<i>F</i> (3,61)	1.82					

Note. All tests non-significant.

				PBQ/GAL	AS Group					
	Ambivalent		Affirr	native	Irrespo	onsible	Conscien	tiousness		
CRIS Group	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Total	
Emerging Multiculturalist	12	17.5	26	24.8	29	26.4	16	14.3	83	
Multiculturalist	12	19.8	45	28.1	32	29.9	5	16.2	94	
Miseducated Variant	4	9.3	9	13.1	20	14.0	11	7.6	44	
Immersion	10	6.3	0	9.0	2	9.5	18	5.2	30	
Low Race Saliency	27	12.0	12	17.0	15	18.1	3	9.8	57	
Total	65	65	92	92	98	98	53	53	308	
Pearson Chi-Square $(12, n = 308) = 106.22^{***}$										

Chi-Squared Analysis of CRIS Group Distribution among PBQ/GAIAS Groups

Note. 0 cells (.0%) have an expected count less than 5. The minimum expected count is 5.16. ***p < .001.

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	PBQ/GAIAS Group											
		Ambivalent		Affirmative		Irrespo	onsible	Conscier	ntiousness			
SES Group		Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Total		
Middle SES		31	26.6	36	37.6	36	40.1	23	21.7	126		
Lower SES		21	20.3	24	28.7	41	30.5	10	16.5	96		
Higher SES		13	18.1	32	25.7	21	27.4	20	14.8	86		
	Total	65	65	92	92	98	98	53	53	308		
Pearson Chi-Square $(6, n = 308) = 14.56*$												

Chi-Squared Analysis of African American SES Group Distribution among PBQ/GAIAS Groups

Note. 0 cells (.0%) have an expected count less than 5. The minimum expected count is 14.80. *p < .05.

				PBQ/GAI	AS Grou	up			
	Amb	oivalent	Affii	mative	Irres	ponsible	Consci	entiousnes	
								S	
CRIS by SES groups	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Total
EMC/MSES	5	8.2	10	11.6	16	12.4	8	6.7	39
EMC/LSES	4	4.2	9	6.0	6	6.4	1	3.4	20
EMC/HSES	3	5.1	7	7.2	7	7.6	7	4.1	24
MC/MSES	2	5.9	17	8.4	7	8.9	2	4.8	28
MC/LSES	7	7.0	8	9.9	16	10.5	2	5.7	33
MC/HSES	3	7.0	20	9.9	9	10.5	1	5.7	33
MVC/MSES	2	3.4	3	4.8	6	5.1	5	2.8	16
MVC/LSES	17	9.5	8	13.4	16	14.3	4	7.7	45
MVC/HSES	0	2.5	4	3.6	4	3.8	4	2.1	12
IC/MSES	7	3.0	0	4.2	1	4.5	6	2.4	14
IC/LSES	2	1.5	0	2.1	1	2.2	4	1.2	7
IC/HSES	1	1.9	0	2.7	0	2.9	8	1.5	9
LRS/LSES	6	4.2	5	6.0	8	6.4	1	3.4	20
LRS/HSES	6	1.7	1	2.4	1	2.5	0	1.4	8
Total	65	65	92	92	98	98	53	53	308

Chi-Squared Analysis of CRIS x SES Group Distribution among PBQ/GAIAS Groups

Pearson Chi-Square (39, *n* = 308) = 139.17***

Note. 29 cells (51.8%) have an expected count less than 5. The minimum expected count is 1.20. ***p < .001. EMC = Emerging Multiculturalist Group, MC = Multiculturalist Group, MVC = Miseducated Variant Group, IC = Immersion Group, LRS = Low Race Saliency Group, HSES = Higher SES, MSES = Middle SES, LSES = Lower SES.

	PBQ/GAIAS Group											
	Ambivalent		Affirmative		Irresponsible		Conscientiousness					
Race	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Total			
European American	20	14.5	19	19.2	11	18.9	14	11.4	64			
African American	64	69.5	92	91.8	98	90.1	52	54.6	306			
Total	84	84	111	111	109	109	66	66	370			
Pearson Chi-Square $(3, N = 373) = 7.16*$												

Chi-Squared Analysis of Distribution of African American and European American Mothers among PBQ/GAIAS Groups

Note. 0 cells (.0%) have an expected count less than 5. The minimum expected count is 11.42. *p < .05.

Table 14

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Chi-Squared Analysis of Distribution of SES Groups among PBQ/GAIAS Groups

	PBQ/GAIAS Group											
		Ambivalent		Affirmative		Irresponsible		Conscien	tiousness			
SES Group		Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Total		
Middle SES		38	34.8	43	44.9	39	44.1	31	27.1	151		
Lower SES		25	24.9	26	32.1	46	31.6	11	19.4	108		
Higher SES		23	26.3	42	33.9	24	33.3	25	20.5	114		
	Total	86	86	111	111	109	109	67	67	373		
Pearson Chi-Square $(6, N = 373) = 7.16**$												

Note. 0 cells (.0%) have an expected count less than 5. The minimum expected count is 19.40. **p < .01.

		PBQ/GAIAS Group										
	Ambi	valent	alent Affirma		native Irrespo		Conscientiousness					
SES x Race	Actual	Expected	Actual	Expected	Actual	Expected	Actual	Expected	Total			
African American Middle SES	31	29.1	36	37.5	36	36.8	23	22.6	126			
African American Lower SES	21	22.1	24	28.6	41	28.1	10	17.2	96			
African American Higher SES	13	19.8	32	25.6	21	25.1	20	15.4	86			
European American Middle SES	7	5.8	7	7.4	3	7.3	8	4.5	25			
European American Lower SES	4	2.8	2	3.6	5	3.5	1	2.2	12			
European American Higher SES	10	6.5	10	8.3	3	8.2	5	5.0	28			
Total	86	86	111	111	109	109	67	67	373			
Pearson Chi-Square $(15, N = 373) =$	29.63*											

Chi-Squared Analysis of Distribution of Race x SES Groups among PBQ/GAIAS Groups

Note. 5 cells (20.8%) have an expected count less than 5. The minimum expected count is 2.16. *p < .05.

APPENDIX III: PARENTING BELIEFS QUESTIONNAIRE

This questionnaire contains statements about beliefs and opinions that some parents have expressed.

Please rate the following statements on a scale from 1 to 9; where 1 means that you Strongly Disagree with the statement and 9 means that you Strongly Agree with the statement.

1. Children are born basically "good."

Strongly Disagree			Neither Agree nor Disagree		Strongly Agree
□ 1	□ 2	□ 4		□ 7	

2. It is the parents' fault if children misbehave.

Strongly Disagree			Neither Agree nor Disagree		Strongly Agree
□ 1	□ 2	□ 4	□ 5	□ 7	□9

3. Some people just know by instinct how to be good parents.

Strongly Disagree			Neither Agree nor Disagree		Strongly Agree
□ 1	$\Box 2$	□ 4		□ 7	□ 9

4. Even good parents would benefit from going to a parenting class.

Strongly Disagree			Neither Agree nor Disagree		Strongly Agree
□ 1	$\Box 2$	□ 4		□ 7	□ 9

Strongly Disagree			Neither Agree nor Disagree		Strongly Agree
□ 1	$\Box 2$	□ 4	□ 5	□ 7	□9

5. Children will grow up behaving well if they are not taught how to misbehave.

6. It is the parents' fault if children behave badly.

Strongly Disagree				Neither Agree nor Disagree			Strongly Agree
□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□ 7	□9

7. No one is born a good parent, they must learn how to be a good parent.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	□ 2		□ 4			\Box 7		

8. I would feel like a bad parent if I were asked to go to a parenting class.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	$\Box 2$		□ 4	□ 5		□ 7		□ 9

9. Children naturally want to be good.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	$\Box 2$		□ 4	□ 5	□ 6	□ 7		□9

10. Parents are to blame for their children's bad behavior.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□ 7		□9

11. Parenting is learned.

Strongly Disagree		Neither Agree nor Disagree						
□ 1	$\Box 2$		□ 4	□ 5		□ 7		□ 9

12. Most parents can learn new parenting skills by taking a parenting class.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	□ 2		□ 4	□ 5		□ 7		

13. Children will misbehave if given the chance.

Strongly Disagree	Neither Agree nor Disagree							
□ 1	□ 2		□ 4	□ 5		□ 7		□ 9

14. Children behave properly because their parents taught them to.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	□ 2		□ 4	□ 5		□ 7		□9

15. Good parents are born, not made.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	$\Box 2$		□ 4	□ 5		□ 7		□9

16. I already know everything I need to know about parenting.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	$\Box 2$	□ 3	□ 4	□ 5	□ 6	□ 7		□9

17. Children will be bad because it is in their nature to be bad.

Strongly Disagree			Neither Agree nor Disagree	Strongly Agree		
\Box 1	$\Box 2$	□ 4			$\Box 7$	

18. Children will misbehave no matter what their parents say or do.

Strongly Disagree	Neither Agree nor Disagree							Strongly Agree
□ 1	□ 2	□ 3	□ 4			□ 7		□ 9

19. Anyone can learn to be a good parent.

Strongly Disagree	Neither Agree nor Disagree							
	□ 2		□ 4		□ 6			Agree □ 9

20. Only people who are bad parents need to go to parenting classes.

Strongly Disagree		Neither Agree nor Disagree						Strongly Agree
□ 1	$\Box 2$		□ 4	□ 5		□ 7		□9

21. Children must be taught how to behave well.

Strongly Disagree		Neither Agree nor Disagree						Strongly Agree
□ 1	$\Box 2$		□ 4	□ 5		□ 7		□9

22. Children learn to be "good" or "bad" from their parents.

Strongly Disagree		Neither Agree nor Disagree						Strongly Agree
□ 1	$\Box 2$	□ 3	□ 4	□ 5	□ 6	□ 7		□9

23. I think parenting skills need to be learned.

Strongly Disagree			Neither Agree nor Disagree		Strongly Agree
□ 1	$\Box 2$	□ 4		$\Box 7$	

24. If someone asked me to go to a parenting class I would feel like that person thought I was a bad parent.

Strongly Disagree		Neither Agree nor Disagree					Strongly Agree
□ 1	$\Box 2$		□ 4	□ 5		□ 7	□9

APPENDIX IV: FIGURES

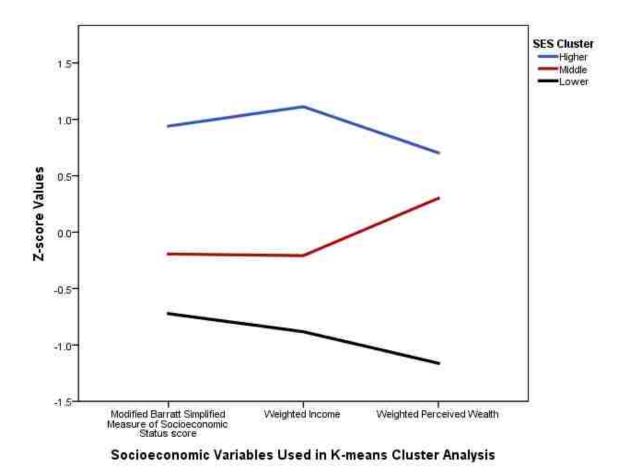


Figure 1. Z-score profiles of socioeconomic variables for k-means three-cluster solution groups.

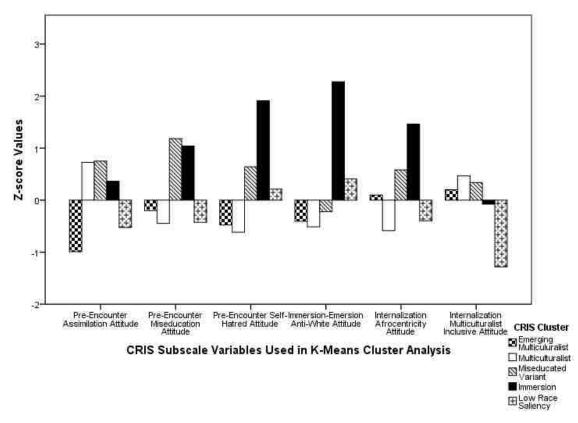


Figure 2. Z-score profiles of CRIS subscales for k-means five-cluster solution groups.

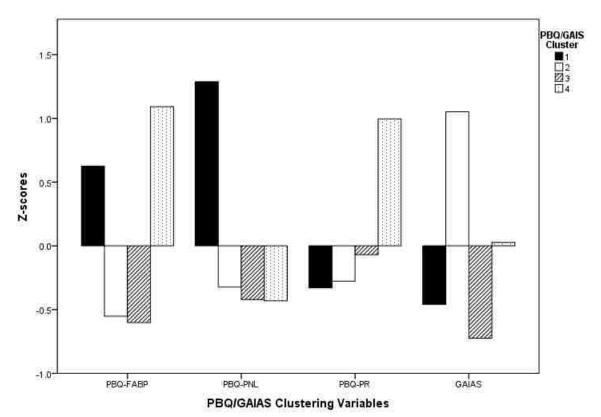


Figure 3. Z-score profiles of PBQ and GAIAS variables for *k*-means four-cluster solution groups. PBQ/GAIAS Cluster 1 = Ambivalent; PBQ/GAIAS Cluster 2 = Affirmative; PBQ/GAIAS Cluster 3 = Irresponsible; PBQ/GAIAS Cluster 4 = Conscientiousness.

APPENDIX V: RECRUITMENT LETTER



Letter of Invitation to Participate in Research

MOTHER'S NAME STREET CITY, STATE ZIP

Dear MOTHER'S NAME,

I am a doctoral student in the Clinical Psychology program at the University of Nevada, Las Vegas (UNLV). I am writing to invite you to participate in a research study to investigate the cultural beliefs and values of African American and European American mothers so we can design better parenting programs.

You are being asked to participate in the study because you are either an African American or European American mother at least 18 years old who has a child that is 5 to 10 years old enrolled in the Clark County School District (CCSD). To participate, all you have to do is take a brief survey by phone or online. All answers will be completely anonymous and confidential.

If you want to participate in this study, you can either:

- Send an email to <u>simmonsr@unlv.nevada.edu</u>. You will then get an email back with instructions for a link to an online survey OR
- 2) Call (702) [number TBD] from 9am-9pm on Fridays through Tuesdays to take the survey over the phone.

There will be no financial cost to you to participate in this study. If you participate, you will get entered in a drawing for a \$25.00 gift certificate to WalMart. Drawings will be held after the completion of every 50th survey, so you will have a 1 in 50 chance of winning. Your participation is voluntary and you may quit the survey at any time and still receive your entry into the drawing.

If you have any questions or concerns about the study, you may contact, Dr. Cortney S. Warren, Professor, Psychology Department, University of Nevada, Las Vegas at 702-895-0109. For questions regarding the rights of research subjects, any complaints or comments regarding the manner in which the study is being conducted you may contact the UNLV Office of Research Integrity – Human Subjects at 702-895-2794 or toll free at 877-895-2794 or via email at IRB@unlv.edu.

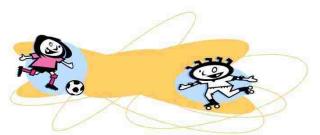
All information gathered by this survey will be kept completely confidential. No reference will be made in written or oral materials that could link you to this study. Your survey answers will not be linked to any identifying information. The only identifying information collected will be viewed only by me and will be destroyed at the end of the study. All other de-identified data and will be saved on a secure computer server in Dr. Warren's lab.

Thank you for considering participating in this study.

Sincerely,

Rachel Davis, M.A. University of Nevada Las Vegas Dept. of Psychology 4505 Maryland Parkway Box 455030 E-mail: simmonsr@unlv.nevada.edu

APPENDIX VI: RECRUITMENT FLYER



Are you a Black/African American or White/ European American mother of a child 5 to 10 years old?

You have a chance to participate in a research study about Parenting Beliefs and other beliefs that could stop parents like you from participating in

parenting classes.

I want to know what you think!

This research survey will take approximately 45 minutes.

You may take the survey online at your convenience by emailing: simmonsr@unlv.nevada.edu

OR

You may take the survey on the phone from Friday to Tuesday, 9am-9pm, by calling: (702) NUMBER TBD

You will receive one entry into a drawing for a \$25 gift

certificate for WalMart as a thank you for your time.

Only one entry per mother. One drawing will be held for every 50 entries. Odds of winning are 1 in 50.

| simmonsr@unlv.nevada.edu |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| OR 702-Number TBD |
| nevada.edu |
| ber TBD |

Potential Deterrents to Recruitment for Parenting Skills Classes

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