

**A PSYCHO-EDUCATIONAL PROGRAMME TO
ENHANCE THE EFFICACY OF PARENTS OF
ADOLESCENTS**

by

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DECLARATION

I declare that A PSYCHO-EDUCATIONAL PROGRAMME TO ENHANCE THE EFFICACY OF PARENTS OF ADOLESCENTS is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

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DATE

Even when I am old and gray,
do not forsake me, O God,
till I declare your power to the next generation,
your might to all who are to come.

Your righteousness reaches to the skies, O God,
You who have done great things,
Who, O God, is like you?

(Psalm 71: 18-19)
New International Version

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SUMMARY

The aim of this study was to *develop, implement and evaluate a psycho-educational programme to enhance the efficacy of parents of adolescents*. Thus, the research project can be identified as formative, evaluative research. To this end, an investigation was undertaken to determine how the efficacy of parents of adolescents could be enhanced through an understanding of:

- the life phase of adolescence;
- the life phase of parents of adolescents;
- the role of parents of adolescents;
- factors influencing the parenting of adolescents (e.g., generational effects and the influence of family structure on parenting);
- the challenges facing adolescents and their parents which may hamper parenting efficacy;
- factors which assist parents of adolescents to overcome challenges and improve their parenting efficacy;
- parenting skills which foster parenting efficacy; and
- the nature of a psycho-educational programme which could enhance the efficacy of parents of adolescents.

A literature study provided the theoretical background to the development of the above mentioned programme. In the next phase of the study, a psycho-educational programme was developed based on the literature review, a study of similar programmes and a pilot study conducted with parents. The programme aimed at helping parents to become aware of their parenting practices, to encourage them to increase knowledge and understanding of themselves and of their adolescent children and to develop personal strategies and skills to cope with parenting challenges. The programme was implemented with a group of 21 parents of adolescents (five fathers and sixteen mothers) living in George, South Africa during sessions held once per week over a period of six weeks. Participants were divided into three groups: six single parents; eight parents of nuclear families; and seven parents from blended-extended families. Data was

collected qualitatively during each meeting. In addition, focus groups were conducted at the end of the six weeks. The findings indicated that the programme enhanced the efficacy of the participating parents in supporting the development of their adolescent children.

KEY WORDS

- Parenting adolescents
- Psycho-educational programme
- Challenges of adolescence
- Parenting efficacy
- Parenting skills
- Erikson's psycho-social stages
- Generational theory
- Family structure

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CHAPTER ONE

ORIENTATION AND OVERVIEW

1.1 INTRODUCTION

Almost two decades ago, Yeats (1990:8) expressed astonishment that years of study and the acquisition of qualifications are required before people can embark on professions, such as, that of architect or doctor, yet those who desire to become parents do so without any qualifications. Gordon (2000:2) reminds us of the importance and enormity of the parenting task as follows: “Millions of new mothers and fathers take on a job each year that ranks among the most difficult anyone can have: taking an infant, a little person who is almost totally helpless, assuming full responsibility for his physical and psychological health and raising him so that he will become a productive, cooperative, and contributing citizen. What more difficult and demanding job is there?” He goes on to emphasise the importance of training people for the vital parenting role.

Parenting is accompanied by many challenges for which parents feel ill equipped (Townsend 2006: 10-11). Neethling and Rutherford (1999:8) point out that many parents of adult children battle with guilt feelings about parenting mistakes they might have made and the thought: “If only I had known that then.” They advocate measures to help parents by providing them with education and support for their parenting role.

Sharry (2002:4-5) explains that parenting appears to have become an increasingly difficult task. He states that families are subject to increased pressures; have to manage with less support from the extended family and community; often feel more isolated than families in the past; and, at the same time, have to cope with ‘scrutiny from the outside’. The latter refers to parents’ awareness of what is regarded as ‘good parenting’ and the increased expectation of parenting excellence.

Parents appear to be confused and lack clear directives on how to cope with their parenting role (Ehrensaft 1997:7). Mothers are expected to take their place in the workplace, but also at home. Fathers are supposed to strive to accomplish in the workplace and be nurturing fathers. Dramatic changes in social conditions and family structure has raised uncertainty even among the experts about how children should be raised. Parents who currently have adolescent children often have the formidable task of developing their own talents and careers while coping with the responsibility of parenting and, in many cases, caring for their own parents (Codrington & Grant-Marshall 2004:85-87).

The parenting role changes as children develop and grow. Parents have to adapt to changing needs and challenges common to different life stages of their children (Carr-Gregg 2005: 1-3). Parenting a child through adolescence is often thought to be one of the most challenging stages of parenting (Jones, Forehand & Beach 2000:513; Townsend 2006: 10-17). Yeats (1990:130) points out that no-one warns parents, "As we raise our teenagers, we will need all the knowledge of an encyclopedia, the will of a lion tamer and the patience of a butterfly collector".

Sharry (2002:115-116) outlines aspects of parenting adolescents which make this a particularly challenging period. These include the following:

- adolescents may be inclined to be argumentative, resentful and challenging towards parents;
- they may become secretive, often resulting in parents feeling redundant and shut out of their adolescents' lives;
- parents often fear for their adolescent children who may face pressure to be involved in alcohol, drugs or early sexual activity or get into situations which are a threat to their safety; and
- parents may battle to set limits with an adolescent who may resent and challenge parental authority.

Parents are also blamed for the troubles of adolescents and social problems caused by these young people (Gordon 2000: 1-2; Smith 2003: 1-9). Parents are 'blamed but not

trained'. They are told they are failing, yet they are given very little assistance or training to help them to discover what they are doing incorrectly and how to act more effectively.

Parents are often in their forties and fifties when their children reach adolescence and may be experiencing a midlife crisis (Sharry 2002:116). They may be consumed with worries about life choices they have made, may feel that their opportunities are dwindling and may become anxious and 'driven' in their attempts to ensure that their adolescents do not make the same mistakes or miss important life opportunities (Sharry 2002:116; Smith 2003:34-35). Many parents have to cope, not only with changes in themselves (relating to their midlife transition period), but also to even more drastic changes in their children as they move through adolescence (Gerdes 1998:150 & Smith 2003:34-35).

Parents may also be distressed if they were looking forward to a quieter period, only to be confronted with a rude, difficult adolescent (Sharry 2002:116). If parents get caught up in viewing adolescence negatively, they may tend "to lose sight of the bigger picture and miss out on the enjoyable aspects of parenting a teenager" (Sharry 2002:116).

This period may not only be difficult for parents, but is also often quite difficult for the child (Atkinson 2006:8; Sharry 2002:117). Because so many changes occur in such a short period, adolescents are often left feeling "confused, frightened and lacking in confidence" (Sharry 202:117). Physical changes can make them feel self-conscious and awkward; emotionally they may experience extreme mood swings; hormonal changes can result in alarming sexual feelings; intellectually, they can think about things critically and analytically and may begin to recognise "inadequacies in the parental world" which they may be keen to point out; and they may be unsure of their role and meaning in life. In addition, the pressures faced by adolescents mean that they need the support of parents much more than in the past.

As MacFarlane and McPherson (1999:11) explain most of the basic challenges for parents of adolescents are "as old as the human race itself" but also note that "they are continually and subtly changing and being reinvented in the light of contemporary pressures within our society". We appear to be living in a time during which it is very

demanding to be a parent and even more challenging to be a child, with there being “more influences than ever on children, and more sources of distraction” (Elias, Tobias & Friedlander 2000:2).

1.2 PROBLEM FORMULATION

From personal experience as a parent of two adolescent children (aged 14 and 18 years), my experience as an educator, my work as an educational psychologist (which involves working with children and adolescents as well as their parents as part of a therapeutic process) and my informal interactions with other children and parents, who are living in and around the town of George, South Africa, I have discovered that many parents experience stress as a result of the challenges of being a parent. Many challenges are exacerbated by social changes and trends. I have also noted that being a parent of an adolescent often brings new or altered challenges, which require changes in parenting attitudes and strategies.

I became aware of challenges common to many parents: providing for children's basic needs (such as food, shelter, clothing, education and health); helping children to develop physically, cognitively, emotionally and socially; coping with children who are having difficulties in one or more of these areas of development; communicating and disciplining effectively; and ultimately raising children who are independent, happy and productive members of society.

Speedie and Bauling (2002:10) note that in South Africa many families and children are in distress and resources appear to be limited. They point out that parenting skills programmes would be very effective in enabling more families to be functional. Such programmes mean more effort in the short term but less work in the long term; could increase parents' knowledge and self-confidence in handling the needs of growing children as well as their own; and could help to address problems of troubled children.

In my practice, I have often had dealings with parents who are overwhelmed by their adolescent children. They are often shocked by the changes in their children and more

specifically, by how their children relate to them as parents. An anonymous poem (no known source), which I often share with parents, compares younger children to dogs who are loyal and affectionate; teenagers are compared to cats who appear distant and anti-social. The poem describes how shocking the change is for parents, who are frequently overcome with guilt and fear and assume that they 'must have done something wrong'. The poem concludes by explaining the need for parents to change *the way* they interact with their teens, "instead of continuing to act like a dog owner ... learn to behave like a cat owner".

The physical, emotional, cognitive and social changes which occur during the adolescent stage often change the way adolescents respond to those around them. It is also a life stage characterised by increased independence and increased peer pressure and social influences. Some problems which may become more prevalent during adolescence are depression and suicide; drug and alcohol related problems; sexual behaviour and relationships with members of the opposite sex; and appearance or body image problems and related eating or mood disorders (Gerdes 1998: 150; Townsend 2006:9-11).

I maintain that the following societal trends increase the challenge of contemporary parenting: the divorce rate; the increase in single-parent families, reconstructed families and mothers in full time employment; the increase in external influences on children (e.g., the media and the internet) with a concurrent drop in the interaction between children and parents; increased materialism; and the changes in how children are disciplined and raised in families and at school.

The way parents handle divorce and cope with single parenting, reconstructed families and co-parenting have a profound influence on the ways in which these relatively new societal trends affect children and adolescents. Emery (2004:14) indicates that the onus is on the parent to ensure a positive outcome for their children: "If you can be a parent first, even while facing all the challenges and changes in your life, then your kids will be free to be what you want them to be and what they deserve to be: just kids". The moment children have to take responsibility for a parent's emotions or concerns, they are robbed of their childhood and the opportunity to address developmental tasks. Divorce is particularly difficult for adolescents as it disrupts adolescents' family life, after school

activities, relationships with friends, dating and even plans for tertiary education (Emery 2004:120; FAMSA 2007). Divorce present many tasks, which both parents and adolescents need to accomplish: renegotiating relationships, learning to establish and relate to each other with new boundaries, adjusting to new circumstances and finding a place and an identity within a shifting family “frame” (Emery 2004:27). Children can be helped to cope with divorce if parents find effective ways to manage their relationships with their children and with each other. “Before, during, and after divorce, you (that is, the parents) can make the decisions, take the actions, and create the environment that will reduce stress, lower risk, and foster your children’s resilience” (Emery 2004:65). This places an added burden on parents who already have a formidable task.

While some parents of adolescents are enthusiastic about and cope with their parenting role; others appear to be overwhelmed and/or stressed. Difficulties as well coping skills should be identified to develop a programme which will provide education and support for parents to adjust to changes and be effective parents.

The importance of identifying key psycho-educational elements to be included in such a programme becomes apparent. To do this the challenges faced by adolescents and parents of adolescents should be identified and used in the development of a psycho-educational programme to enhance the efficacy of parents of adolescents.

1.3 RESEARCH QUESTION

The main research question chosen to guide this investigation and assist in the achievement of the research aims (see section 1.4) is as follows:

How can the efficacy of parents of adolescents be enhanced?

1.4 AIMS OF RESEARCH

The aim of this study is to *develop, implement and evaluate a psycho-educational programme to enhance the efficacy of parents of adolescents*. The programme is aimed

at helping parents to develop personal resources and utilise social resources to cope with the challenges of being a parent, increasing their efficacy as parents, thereby benefiting themselves, their adolescent children, the communities in which they live and society in general.

To reach the aim of developing such a programme, two main questions are posed to direct the research:

1. What are the challenges facing adolescents and their parents?
2. How can parents be assisted, by means of psycho-educational programmes to overcome these challenges and enhance their efficacy as parents of adolescents?

1.5 PARADIGMATIC PERSPECTIVE

According to Mouton and Marais (in Loock 1999:10), a researcher's assumptions and beliefs reflect his/her way of thinking and possibly also the research process and should thus be made known to the reader. As Miles and Huberman (1994:4) point out, by declaring the paradigmatic perspective of the researcher, the reader is able to obtain a more holistic view of the research. They explain this as follows: "To know how a researcher constructs the shape of the social world and aims to give us credible account of it, is to know our conversational partner".

1.5.1 The metatheoretical perspective

The metatheoretical perspective refers to the researcher's personal assumptions concerning the field of study or subject area researched and includes the researcher's assumptions about human nature (Loock 1999:12).

This research emerged from within a psycho-educational perspective and, as such, many assumptions and beliefs have their origin in either the field of psychology or of education. I agree with Donald, Lazarus and Lolwana (1997:52-53), who maintain that the educational psychologist should not focus only on the development of the child, but

should rather see development as a continuous process from conception to death. Furthermore, I support the principle of life-long education (Delors 1996:99) which advocates that one has a life-long ability and need to continue to learn, grow and develop one's potential. As stressed by Fordham (in Looock 1999:11), I also argue that the 'whole person' (which includes all aspects of being human – see discussion below) should be educated and supported in such a way that his/her God-given potential can be optimally developed. This assumption is clearly illustrated by Feuerstein (in Looock 1999:11-12) who emphasises the need to recognise that all human beings have worth and dignity as well as the capacity for positive change. My assumptions about human nature now follow.

- *Assumptions about human nature*

I believe that every person:

- is a unique, valuable individual, created by God;
- has unique talents and potential with corresponding life functions and roles to fulfill;
- although affected (both positively and negatively) by life circumstances and events beyond personal control, has the freedom to make many choices which will determine the direction and quality of his/her life;
- is made up of a physical component or body (which refers to the physiological and biological processes), a psychological component or soul (which refers to the cognitive, affective and conative processes) and a spiritual component (which refers to that part of man which is capable of communing with God); and
- in order to experience wholeness or psychological health, should maintain the three components mentioned in the above point.

To sum up, parents, as is true for all adults, could be helped to live more effective lives if they are committed to life-long education, willing to continue to be teachable and to learn more effective ways of fulfilling their particular life tasks, purpose and life roles. I argue that ways can be found to make parents aware of their potential, their ability to meet the challenges of parenting adolescents and to encourage them to work towards increased efficacy in the role of guiding their children into adulthood. I maintain that

parents can help adolescents to develop wholeness as described above, and in so doing, help them become productive, healthy and active members of society who are, in turn, able to guide their own children and adolescents in a similarly effective way.

1.5.2 Theoretical perspective

My theoretical perspective has emerged largely from the following theories or perspectives.

- *Nursing theory for personal wholeness* (Oral Roberts University: Anna Vaughn School of Nursing in Loock 1999:12-14) is based on Judaic-Christian philosophy. The Judaic-Christian world-view and philosophy is based on biblical principles and values, recognises humankind's continual striving for wholeness and believes that people can only be understood in relation to God. This approach views the individual as a whole person, consisting of body, soul and spirit (Loock 1999:12).
- *Developmental theory* recognises the existence of different developmental phases throughout the lifespan, with different developmental/life tasks associated with each phase. The fifth stage of Erikson's theory, namely, ego identity versus role confusion (which pertains to the adolescent) and the second last stage (which pertains to parents of adolescents), namely generativity versus stagnation (Erikson 1963:262-267; Gerdes, Ochse, Stander & Van Ede 1988:65-66; Hook 2002:279-288) are especially pertinent to this study. The assumptions are that the adolescent should be striving to form a strong sense of identity rather than a confused identity and the parent should be seeking to produce and to transmit culture and its values to the next generation (see sections 1.6.2 and 1.6.5). Development, in this study is seen as development of the whole person throughout the lifespan. As Donald et al (1997:3) explain, "...interaction of the physical, cognitive, social, emotional and moral dimensions of development occurs continuously throughout life".
- *Constructivist perspective*: This perspective is proactive rather than reactive by nature. This means that the focus is not on the influence which circumstances (e.g.,

peer pressure, adolescent rebellion or the 'mid-life crisis') have on the individual, but rather on what the individual can do to influence and control his/her own life (Donald in Looch 1999:19).

- *Theories on adolescent development:* These include theories on the physical, cognitive, moral and psycho-social development occurring during adolescence. (These underpin much of the discussion in Chapter Two.)

In addition to the above theories, definitions of concepts indicative of my theoretical perspective are outlined in the ensuing section (1.6).

1.5.3 Methodological assumptions

I regard scientific research, together with a functional approach, as essential in this study. Parents of adolescents supplied the data in focus groups. From this data, key factors related to parenting of adolescents were determined. In the process, a psycho-educational programme to enhance the efficacy of parents of adolescents was designed, implemented and evaluated.

1.6 CLARIFICATION OF CONCEPTS

In this section, a number of concepts relevant to this research are defined.

1.6.1 Psycho-educational programme

Psycho-educational programmes are based on the assumption that certain general life skills are necessary for effective human functioning and that education may be necessary and/or helpful in developing these skills, where lacking (Knott 1998:3; Speedie & Bauling 2002:10). The aim of a psycho-educational programme is to help the individual to develop a wide range of skills and behaviour patterns, as well as to develop the ability to effectively utilise available social resources, which are essential for optimal functioning in the community (translation - Knott 1998:6).

Psycho-educational programmes are based on the premise of learning through self-discovery, with individuals being encouraged to find their own answers and solutions. In these programmes, although educational in nature, in which certain information and skills are presented, the emphasis is on a process, common in most psychological therapies (see section 6.2.2.6). This involves moving from an awareness phase (where attendees are made aware of the topic/issue at hand); through an exploration phase (where attendees are encouraged to actively participate in the further exploration of the topic/issue); and finally to a personalisation phase (where attendees apply what has been discovered to their own lives).

Psycho-therapy is primarily a reactive approach which aims to overcome pathology and restore mental health. Psycho-education, on the other hand, is a more proactive approach which uses various educational and psychological techniques to foster psychological well-being, develop personal and social skills and encourage people to utilise available resources, with the aim of functioning optimally in everyday life situations and preventing maladjustment (Knott 1998:6-7).

1.6.2 Adolescence

Carr-Gregg (2005:5) states that 'adolescence' comes from the Latin word *adolescere*, which means to grow to maturity. Adolescence is seen as a natural phenomenon in the life of every child and as a transitional period between childhood and adulthood (Black 1996:36; Carr-Gregg 2005:5).

Many researchers, while accepting that adolescence is often regarded as a turbulent, stressful or difficult time for adolescents and their parents, also point out that this is not necessarily always the case (Black 1996:36; Carr-Gregg 2005:17; Ezzo & Bucknam 2000:9-10; Gordon 2000:2-3). According to Black (1996:36) there are many misconceptions and myths concerning adolescence which could have resulted, in part, because of peoples' attempts to understand the troublesome behaviour of some adolescents during this period. The myths of adolescence, according to Black (1996:39-

40), involve the parent and involve the child. The parent's myth relates to the belief that every child will be difficult or troublesome during adolescence. The child's myth is often that nobody understands him or her.

Carr-Gregg (2005:5) maintains that one of the main reasons for difficulties during this period is that it is a transitional period, where the adolescents are no longer children, nor yet adults. He goes on to explain that they are striving for independence and autonomy but are still "fragile beings in the process of growing and developing". This transition does not happen instantaneously, nor does it go on forever. Two main things happen during this transition, namely (Black 1996: 37-38):

- children begin to move about and do things on their own (that is, they become more independent); and
- the relationship between children and their parents begins to change.

Most experts agree that the adolescent is faced with many changes (physical, social, intellectual and emotional) and divide adolescence into sub-stages to further our understanding of this transition period (Carr-Gregg 2005:5-13; Gerdes 1998:146). Carr-Gregg (2005:8-13) divides adolescence into three phases, namely: early, middle and late adolescence, with each phase being characterised by specific characteristic changes and life tasks. *Early adolescence* as a time characterised by many physical, mental and emotional changes; of pulling away from parents; of self-consciousness; and a nagging concern about adolescents' own normality. *Middle adolescence*, young people become critical of their parents; seek comfort and a sense of belonging from their peers; and seek to exert their own independence and individuality by rejecting adult support or control. Lastly, *late adolescence* is the period when young people have come to terms with their identity; begun to understand their life role; and have generally become more accepting of adult assistance with setting life goals and strategies.

According to Gerdes (1998:146), the terms 'teenager' and adolescent' are synonymous and refer to a person between the ages of 13 and 19 years. She defines *early adolescence* as the period between about 13 and 16 and *late adolescence* as the period between 17 and 19 years. She warns that this is an arbitrary division.

In the present study, adolescence is taken to refer to the period between 13 and 19 years and encompasses the above sub-stages described by Carr-Gregg (2005:8-13) and Gerdes (1998:146). It is apparent that this life stage is a unique developmental stage characterised by many adaptations and life tasks. These are discussed in depth in Chapter Two (see Section 2.5.1)

1.6.3 Parenting

Chidekel (in Caldera 2005:82) views parenting as a relationship that includes the parent and the child and explains that the parents' role is to take responsibility for protecting and guiding their children so that they will be successful adults in all areas of their lives. She stresses that parents are responsible for their child's physical, emotional, intellectual and social needs.

The long-term goal of parenting can be defined as helping "your children to grow into responsible adults who are independent and confident but also appropriately connected to their family and able to form their own intimate relationships in the future" (Sharry 2002:6). Black (1996:22-26) states that children need to be released into adulthood while living at home. The goal of parenting is to develop healthy adults, not to have a house full of obedient children. Since the goal of parenting is to release well-balanced young adults into the world, we need "from the day our children are born ... to be considering the time we will let them go" (Black 1996:26). It is important, therefore, that parents know how and when to release them (Veerman 2006:11).

The family can be defined as "the fundamental kinship unit" (Reber & Reber 2001:268). In its nuclear form, the family is made up of mother, father and offspring and the broader meaning may refer to the extended family which would include grandparents, aunts, cousins and the like. In this study, the focus is mainly on the parents and their offspring. As couples with families may divorce, never marry, or never live together, types of family structure have multiplied in modern society and no longer fit neatly into the

definition given above (Kleist 1999:373). In this study we focus on parenting in the following three different kinds of families:

1.6.3.1 The nuclear family

The nuclear family refers to a family such as that described above, namely, a family consisting of a mother, father and their own offspring.

1.6.3.2 The single-parent family

This family refers to a family in which only one parent (either the mother or the father) lives with and cares for the children (Kleist 1999:373; Worth & Tufnell 2001: 1-6). This type of family can arise after divorce, after the death of one parent, if an unmarried mother decides to remain single and parent the child alone, or if parents decide not to marry and one of the parents takes on the care of the child or children.

1.6.3.3 The blended-extended or reconstructed family

LeBey (2005:1-3) states that the relationships joined together by a re-marriage becomes known as a blended-extended family. She goes on to explain that this term is now used interchangeably with the term 'step-family' and is also sometimes referred to by the term 'reconstructed family'. All these terms refers to a "family unit in which one parent is not the biological parent of at least one child".

1.6.4 Efficac of parents

The Oxford Dictionary (Soanes & Harker 2005:317) describes 'efficacy' as "the ability to produce an intended result". The aim of this research is to enhance the efficacy of parents of adolescents which means that the aim is to help such parents to parent in such a way that they achieve their intended results or goals of parenting (see section 1.6.3 above).

1.7 RESEARCH DESIGN AND METHODOLOGY

This study on how to enhance effective parenting is qualitative, descriptive and evaluative in nature. Here follows a brief outline of ethical measures, measures to ensure trustworthiness as well as data collection and processing methods employed in this study.

1.7.1 Ethical measures

I undertook to ensure that the research process is conducted in an ethical manner. Ethical measures include: obtaining informed consent (Henning, Van Rensburg & Smit 2004:73; McMillan & Schumacher 2006:334); maintaining anonymity and confidentiality (McMillan & Schumacher 2006:334); avoiding deception while protecting privacy of participants; ensuring researcher competence (Wassenaar 2006:72); and striving to maintain objectivity in relations with participants. These measures are fully explained in chapter five.

1.7.2 Measures to ensure trustworthiness

Lincoln and Guba's model for ensuring trustworthiness (De Vos 2005:345-347) was employed to reduce biases in the results of this qualitative study. The four strategies, which this model proposes to ensure trustworthiness, are employed in this study, namely: *credibility* (which demonstrates that the phenomenon under study is accurately described); *transferability* (which demonstrates the applicability of findings to other contexts); *dependability* (which refers to the consistency of findings if the enquiry were replicated with the same subjects or in a similar context); and *confirmability* (which demonstrates whether the results are confined to data obtained from informants or include the motivations and biases of the researcher).

1.7.3 Method

A qualitative research method is employed in this study. This method is fully described in chapter four. A brief outline of the sampling, data collection and data processing methods are now given.

1.7.3.1 Sampling

Purposeful sampling was used, meaning that information-rich participants were selected for in-depth study (Strydom 2005:328-329). Participants were chosen from the population of middle class parents with adolescent offspring, living in and around the town of George in South Africa.

1.7.3.2 Data collection methods

To determine the challenges that parents of adolescents face, data was collected during a pilot study and focus groups with parents from different groups within the identified population. Tape-recordings of all the focus groups were made which are then transcribed in preparation for data processing. In addition to this, field notes, consisting of observations made during data collection, were kept. Additional methods were used during the implementation and evaluation of the programme as explained in chapter five.

1.8 RESEARCH PROGRAMME

The research report comprises six chapters as follows:

Chapter one provides the background and rationale for the study, the research question, aims of the research, the paradigmatic perspective, an explanation of concepts and a brief description of the research design.

Chapter two presents a literature study on the developmental stage of adolescence. This includes the physical, cognitive, emotional, social and moral development of this life stage and provides a theoretical framework for this study.

Chapter three presents a literature study on the role of parents and the challenges involved in parenting adolescent children. This includes challenges which may be common in different types of parenting situations (for example, the traditional nuclear family, single parent family and reconstructed family).

Chapter four describes the research design and methods.

Chapter five presents a discussion of the findings from the empirical investigation. The description of the empirical investigation includes the design, implementation and evaluation of a programme to improve the efficacy of parents of adolescents.

Chapter six consists of the conclusions from the literature study and the empirical investigation, regarding effective parenting of adolescents. Conclusions are made regarding the effectiveness of this study's programme to enhance the efficacy of parents. Recommendations concerning future psycho-educational programmes to enhance parenting efficacy as well as recommendations for further research are provided. Limitations of the study are also included.

1.9 CONCLUSION

This chapter commenced with an introductory background and rationale for the study. This was followed by problem formulation, the resulting research question and research aim. My perspective has been described, various relevant concepts defined, research methods explained and the planned research programme outlined. Chapter Two will report on the literature study on adolescence.

CHAPTER TWO

ADOLESCENCE

2.1 INTRODUCTION

This chapter presents a literature study on the developmental stage of adolescence. According to Atkinson (2006:1), adolescence is a “psycho-social-biological stage of development occurring between childhood and adulthood” which usually starts with puberty and ends once a reasonable degree of independence, from parents, has been gained. This chapter examines the physical, cognitive, emotional, social and moral development during this life stage. It also discusses how changes in each of these areas could affect adolescent behaviour.

2.2 PHYSICAL DEVELOPMENT

2.2.1 The physical and hormonal changes associated with puberty

According to Shefer (2004:74), the central aspects of physical development in adolescence are the physical and hormonal changes that take place in puberty. Puberty can be defined as “a period of rapid physical maturation involving hormonal and bodily changes that occur primarily during early adolescence” (Santrock 2006:365). The main changes of puberty are a physical growth spurt and the maturation of primary and secondary sex characteristics (Atkinson 2006:4). These physical changes of puberty are initiated by the pituitary gland which stimulates other endocrine glands to produce their own growth- and sex-related hormones (Mussen, Conger, Kagan & Huston 1984:500; Santrock 2006:366). The endocrine system’s role in puberty involves the interaction of the hypothalamus (a structure in the higher portion of the brain, monitoring eating, drinking and sex); the pituitary gland (an important endocrine gland, controlling growth and regulating other glands); and the gonads or sex glands (the testes in males and the

ovaries in females). The pituitary gland sends a signal via the gonadotropins (hormones, stimulating the testes or ovaries) to the appropriate gland to manufacture the hormone. The pituitary gland, through interaction with the hypothalamus, then detects when the optimal level of hormones is reached and responds by maintaining gonadotropin secretion.

The concentration of certain hormones increases dramatically during adolescence (Susman & Rogol 2004:21-23). Testosterone is a hormone associated in boys with the development of genitals, an increase in height and a change in voice. Estradiol is a hormone associated in girls with breast, uterine and skeletal development. Both testosterone and estradiol are present in the hormonal make up of boys and girls but testosterone dominates in male pubertal development, while estradiol dominates in female pubertal development. Testosterone levels have been shown to increase 18-fold in boys but only two-fold in girls during puberty, while estradiol levels have been shown to increase eight-fold in girls but only two-fold in boys (Sanrock 2006:366).

Atkinson (2006:4) explains that the adolescent growth spurt refers to an accelerated rate of increase first in weight and then in height and strength. The adolescent body is bigger, taller and different and a lack of symmetry often occurs because not all aspects of physical growth occur in a balanced way (Gerdes 1998:153). This results in many adolescents appearing to be either gangly or podgy.

Age at onset of puberty varies greatly but for the average boy, sexual maturation begins with more rapid growth of the testes and scrotum and the appearance of pubic hair, followed by an increase in the size of the penis, development of body and facial hair, breaking or lowering of the voice, sperm production, nocturnal emissions (or wet dreams) and an increasingly more masculine body build (Atkinson 2006:4; Mussen et al 1984:464-472,500; Shefer 2004:74-75; Royal College Of Psychiatrists 2004:1). For the average girl, sexual maturation usually begins with breast development, followed by the appearance of pubic and underarm hair and the enlargement of the uterus, vagina, labia and clitoris, with menarche (the onset of menstruation) appearing later in the cycle (Atkinson 2006:4; Mussen et al 1984:464-472, 500; Royal College Of Psychiatrists 2004:1).

As Atkinson (2006:4) points out, these physical changes signal reproductive potential, although peak fertility is generally reached several years later. Menarche occurs at a relatively consistent body mass in girls (Santrock 2006:365). A body mass of about 106 pounds can trigger menarche and the end of the pubertal growth spurt. Changes in skin texture also occur and this sometimes results in skin infections, such as acne (Shefer 2004:75).

Although these changes may seem quite dramatic, puberty is a gradual process, the exact beginning of which is difficult to pin point as hormonal changes begin some years before they become evident as body changes (Shefer 2004:75). Puberty generally starts at about 11 years of age for girls and 13 years of age for boys, with the age of onset of puberty appearing to be dropping in most countries (Royal College Of Psychiatrists 2004:1). Santrock (2006:365) explains that factors such as nutrition, health, heredity and body mass play a role in cross-cultural and historical differences in the onset age of puberty. In Norway, in the 1840's, the average age of menarch was 17, compared to 13, in 2006. Similarly, in the United States of America, the average age of menarche has declined significantly since the mid-nineteenth century.

2.2.2 The psychological and behavioural effects of physical development

According to Shefer (2004:75), the physical changes of adolescence have “multiple psychological consequences”. These changes can affect the adolescents' feelings, thoughts, relationships and behaviour in different ways.

2.2.2.1 The effects of early or late physical maturation

As explained above, the age at which an individual reaches and passes through pubertal changes varies greatly and depends on factors such as gender, heredity, body type, nutrition and health (Atkinson 2006:4; Santrock 2006:365). The pubertal sequence for boys can begin as early as 10 years of age or as late as 13 ½ years of age and may end as early as 13 years or as late as 17 years. The normal range is thus wide enough for it to be possible that two boys of the same chronological age, could differ so much, that one

could be completing the pubertal sequence before the other has even begun it. For girls, the age range for menarche is even wider, with it being considered within the normal range if it appears between the ages of nine and 15.

Gerdes (1998:154) notes that puberty generally begins earlier for girls than for boys and that early or late onset of puberty can have profound psychological and social effects, with these effects being different for boys than for girls. Early or late maturation can cause significant differences in psychological adjustment, affecting the adolescent's body image, moods, satisfaction with appearance, relationships with parents and members of the opposite sex, and even scholastic achievement (Atkinson 2006:4).

Gerdes (1998:154) states that boys who mature early are generally taller and stronger which often results in self confidence and social approval. Atkinson (2006:4) agrees, explaining that more physically mature boys are often more satisfied with their weight and overall appearance than their less mature peers, often resulting in them having a feeling of superiority. Early onset of puberty appears to be less advantageous to girls and could even be a disadvantage as they often are not yet ready for the responses of older boys and men who see them as women (Gerdes 1998:154). While girls tend to dislike being early to mature, often feeling ashamed and embarrassed, boys tend to feel better if they mature early. Puberty frequently affects girls' relationship with parents, with the more physically developed girls tending to talk less to their parents and having less positive feelings about family relationships than less physically developed girls (Atkinson 2006:4). A positive aspect of early maturation for girls, however, is that early maturers tend to achieve higher grades than late maturers in the same class.

Physical maturation means that adolescents often look like adults. As they mature physically, adolescent boys and girls can be bigger than their parents and capable of having children themselves, but they are not yet adults and still require the support of their parents (The Royal College of Psychiatrists 2004:1). Parents and others could be inclined to have too high expectations, especially of those who are early maturers. Gerdes (1998:154) stresses that the dropping in the age of puberty is causing a widening in the gap between physical and emotional maturity.

2.2.2.2 An increase in body awareness

The physical development of adolescence brings on a new awareness and concern about the body (Shefer 2004:75). The changes of puberty can cause adolescents to be “preoccupied with their bodies”. The significant changes of puberty may make it difficult for adolescents to achieve feelings of self-consistency and time is needed to integrate these changes (Mussen et al 1984:501). Females have to adjust to the onset of menstruation, with its accompanying physical discomfort and hormonal influences on mood, while the uncontrolled erection and ejaculation (including nocturnal emissions) may be a source of surprise and concern for males.

The adolescent's self-image in puberty can be threatened by the physical changes of puberty and by the tendency of adolescents to make social comparisons (Focus Adolescent Services 2006:5). Once again there appears to be a gender difference in this focus on the body. While the tendency among males is to strive to develop muscular bodies, females are expected to conform to the slim ideal which is stressed in the media (Shefer 2004:75). In general, throughout puberty, girls have been found to be less happy with their bodies and to have more negative body images than boys (Santrock 2006:368). In addition to this, as puberty proceeds, girls tend to become more dissatisfied with their bodies (perhaps because of an increase in body fat) while boys tend to become more satisfied with their bodies (perhaps because of an increase in muscle mass).

Research (Santrock 2006:368; Shefer 2004:75; Focus Adolescent Services 2006: 5-7) has shown that the normal increases in the body fat of females, which occurs during puberty, can have a negative effect on the body image and self-concept of many girls, with boys and girls often being plagued with concerns about their height, weight, skin (especially acne) and general appearance. Linked to this, is the finding that eating disorders such as anorexia nervosa and bulimia nervosa most frequently start during adolescence, with those most at risk, being adolescents who have higher body fat percentages, who are chronically depressed, or who have much conflict in their family situations (see section 3.6.8.5).

Caradas, Lambert and Charlton (2001:111) stress that although it is often assumed that eating disorders are only present in affluent societies or middle-class families, their findings revealed that abnormal eating attitudes is equally common in South African adolescent girls from different ethnic backgrounds. They found, however, that white girls exhibit greater concerns with body image and body image dissatisfaction than mixed race or black individuals. Their findings support the idea that eating disorders are “culture-reactive rather than culture-bound phenomena” which “may transcend the boundaries of geography, socio-economic status and ethnicity”. Black and mixed race adolescents, who were previously thought to be ‘protected’ from developing eating disorders, may no longer enjoy this protection as they may find themselves in “a socio-cultural flux between traditional cultural values and values instilled by modern Western society”. Eating disorders will be discussed more fully in Chapter Three (see section 3.6.8.5).

2.2.2.3 Increased awareness of sexuality and the development of a sexual identity

According to the Royal College of Psychiatrists (2004:2), the sexual development of adolescence can be very worrying to some adolescents, especially those who are shy and afraid to ask questions. Conversely, there are those adolescents who express their concern and awareness by means of excessive boasting about sexual ability and/or experiences. Research has shown that adolescents are taking increasing risks around their sexual health, with adolescent pregnancies and sexually transmitted diseases becoming more prevalent among adolescents (Carr-Gregg 2005:102-104; Royal College of Psychiatrists 2004:2; Shefer 2004:78). This risky sexual behaviour is discussed in more detail in Chapter 3 (see section 3.6.3.1). Atkinson (2006:4) explains that the adolescent’s new capacity for sexual reproduction requires that the adolescent “master sexual and aggressive drives in socially acceptable ways”. Sexual development and interest in sex are normal aspects of adolescent development, with adolescence being accepted as a “time of sexual exploration and experimentation, of sexual fantasies and realities, of incorporating sexuality into one’s identity” (Santrock 2006:369). Most adolescents think about things like: whether they are sexually attractive, how to do sex; and what the future holds for

their sexual lives. While most adolescents eventually develop a mature sexual identity, most experience times of vulnerability and confusion concerning sexuality.

Mastering emerging feelings and establishing a sense of sexual identity is a multi-faceted, lengthy process, which involves learning to manage sexual feelings (such as sexual attraction or arousal); developing new forms of intimacy; and learning new ways to regulate sexual behaviour in order to avoid undesirable consequences (Crockett, Raffaelli & Moilanen 2003). Santrock 2006:370) stresses that developing a sexual identity involves more than just sexual behaviour, includes “interfaces with other developing identities”, and that sexual identities emerge in the context of physical, social and cultural factors, with most societies placing constraints on the sexual behaviour of adolescents. An adolescent’s sexual identity also involves an indication of sexual orientation (that is, homosexual, heterosexual or bisexual) as well as activities, interests and styles of behaviour. For example, some adolescents:

- have a high anxiety level concerning sex, while others have a low level;
- are strongly aroused sexually, while others experience lower sexual arousal;
- are very active sexually while others are not active at all; and
- are sexually inactive in response to strong religious beliefs, while others may attend church regularly without this inhibiting their sexual activity.

Adolescents appear to engage in a rather consistent progression of sexual activities, beginning with necking (cuddling and kissing), followed by petting, and then finally intercourse, or sometimes oral sex, which has increased substantially in adolescence in recent years (Santrock 2006:370-371). Male adolescents generally begin engaging in such activities a year earlier than their female counterparts and by the end of adolescence, the majority of adolescents in the United States of America have had sexual intercourse. Many adolescents are not emotionally ready to cope with sexual experiences. In addition to this, being sexually active can lead to other problems such as pregnancy or sexually-transmitted diseases (see section 3.6.3.1).

Sexual orientation comes to the fore during adolescence, with temporary crushes on someone of the same sex being quite common, with some adolescents identifying

themselves as being homosexual (Carr-Gregg 2005:112-115; Royal College of Psychiatrists 2004:2; Shefer 2004:78-79). Few researchers have investigated the homosexual identity in adolescents but the little research that has been done, reveals that homosexual adolescents have diverse patterns of initial attraction, often have bisexual attractions, and may have physical and/or emotional attraction to same-sex individuals without necessarily falling in love with them (Santrock 2006:370). One major concern is the lack of support which homosexual adolescents commonly receive from parents, teachers, counselors and peers. The problems or challenges related to sexuality, sexual identification and dating during adolescence are discussed in greater depth in Chapter 3 (see section 3.6).

2.2.2.4 A change in sleep needs and patterns

Pubertal changes can be physically and psychologically demanding and could be the reason why many adolescents experience fatigue, erratic energy patterns and seem to require much sleep (Carr-Gregg 2005:96-100; Gerdes 1998:153; Royal College Of Psychiatrists 2004:1). In addition, studies of adolescent sleep patterns (Carskadon, Viera & Acebo 1993:258-262; Wolfson & Carskadon 1998:875-887) have revealed that adolescents stay up later and go to sleep later, partly as a result of changes in their bodies, as a result of the onset of puberty, and changes in brain chemistry. Melatonin flows into adolescents' brains up to two hours later than it did when they were younger. The melatonin also stays later in the mornings, possibly causing them to want to sleep later, making it difficult for them to wake up and to be alert for school.

While these studies revealed that adolescents need far more sleep than adults, the researchers were shocked by the level of sleep deprivation evident in many of the adolescents they tested. The results indicate that sleep deprivation causes lower school achievement and higher scores on batteries of tests measuring levels of sadness or hopelessness. Carr-Gregg (2005:99-100) highlights the following problems experienced by adolescents suffering from sleep deprivation:

- poor attention span and concentration;
- memory lapses;

- decreases in initiative;
- poor judgment and decision making; and
- increased irritability.

2.2.2.5 Hormonal influences on mood

Adolescence is often a very emotional time, with hormonal release causing deeply felt emotions which often influence and even control behaviour (Ezzo & Bucknam 2000:28-31; Myers 1997:24). Myers (1997:24) describes adolescence as being characterised by “heightened self-awareness”, a “very delicate self-esteem” and sudden mood changes, all of which cause tension in adolescents’ relationships with others, particularly in relations with parents (see section 3.6.1 & 3.6.2). Females seem to experience more intense emotions and mood fluctuations as a result of hormone action (Hersh 2004:37-38), with certain emotions, especially sadness, triggering neurons in an area eight times larger in the female brain than in the male brain (Moir 1991:33-37).

The hormone-behaviour link is quite complex because while hormones can affect behaviour and mood, behaviour and mood can also affect hormones (Susman & Rogol 2004:23-29). Stress, exercise, eating patterns, sexual activity, tension and depression have been shown to activate or suppress various aspects of the hormonal system. Santrock (2006:366) summarised some of the research findings regarding the effect of hormones on behaviour and mood:

- a higher concentration of testosterone was found to be present in boys who rated themselves as more socially competent;
- girls with higher estradiol levels expressed more anger and aggression; and
- social factors, in one study, accounted for two to four times as much variance than hormonal factors in young adolescent girls’ depression and anger.

2.3 COGNITIVE DEVELOPMENT

Cockcroft (2002:176-180) proposes that Jean Piaget (1896-1980) provided the groundwork for many of our beliefs concerning cognitive development. According to Piaget, there are four stages of cognitive development, namely:

- the sensorimotor stage (from birth to two years of age);
- the pre-operations stage (from two to seven years of age);
- the concrete operations stage (from seven to 11 years of age); and
- the formal operations stage (from adolescence onwards).

Piaget argued that while people pass through these stages at different rates, everyone progresses through them in a fixed sequence, with each stage involving an increasingly more complex manner of thinking and therefore being qualitatively different from the previous stage (Cockcroft 2002:180). During the growth of a child's mind toward the capacity for adult thinking, children "need time to practice with fancier mental furnishings at each stage of development" (Healy 2004:108).

Scientists have begun "to look beyond hormones to explain behaviour" of adolescents and have discovered that changes in the adolescent brain may have a large influence on behaviour (Strauch 2003:7). We look at the stage of cognitive development which emerges during adolescence; changes which occur in the brain during adolescence; characteristic thinking patterns of this period; and the effect of the afore-mentioned on adolescent behaviour.

2.3.1 Cognitive stage of development during adolescence

Healy (2004:125) states that at approximately 11 years of age, dramatic changes in mental activity begin to occur. The adolescent, having mastered the world of objects, with the security of concrete rules, now moves towards Piaget's stage of formal operational thought, which involves manipulating abstract ideas which have infinite possibilities and points of view. As with adolescent physical development, there are vast

differences in the timing of these changes among individuals and they can cause much confusion and stress.

According to Cockcroft (2002:187-188), the formal operational thinking of adolescence is a second-order thinking process which involves moving beyond the first-order thinking process of simply discovering and examining relationships between objects. Formal operational thinking involves looking for connections between relationships; the ability to think abstractly about possibilities, moving between reality and possibility; and metacognition, which refers to the ability to think about one's own thoughts or mental processes. In short, formal operational thought involves:

- the ability to formulate, test and evaluate hypotheses;
- the manipulation of known facts and events which are contrary to fact; and
- more systematic thinking, with the ability to think and plan ahead.

Hypothetical-deductive formal operational thought is characterised by three main abilities, namely:

- the ability to combine all variables in order to find a solution to a problem;
- the ability to speculate about the effect of one variable upon another; and
- the ability to combine and separate variables into a type of logical formula, such as if X occurs then Y will result (Cockcroft 2002:188).

Some of Piaget's ideas regarding formal operational thought are being challenged (Keating 2004:45-53). There appears to be much more individual variation in formal operational thought than proposed by Piaget. Research has also shown that not all people are capable of formal operational thought (Cockcroft 2002:188; Healy 2004:125-126). Even those capable of such formal operations, may be unable to maintain them consistently but may fall back on more concrete reasoning when confronted with unfamiliar problems or situations (Cockcroft 2002:188). Santrock (2006:384) explains that initially, for adolescents who become formal operational thinkers, assimilation (which refers to the incorporation of new information into existing knowledge) dominates formal operational thought, and the world is perceived subjectively and idealistically. Later in adolescence, accommodation (the process of adjusting to new information) is used in

response to the cognitive upheaval that has occurred and intellectual balance is restored. Cultural experiences, such as education in the logic of science and mathematics, also play an important role in the development of formal operational thinking.

2.3.2 Changes in the adolescent brain

Townsend (2006:80) points out that until recently, experts believed that brain development was basically complete by the age of about five. Explosive growth occurs in the first five years, with most of the brain cells and connectors in place by that age. As a result of new research using MRI (Magnetic Resonance Imaging) technology, experts now believe that there is a new surge of brain development during adolescence. The adolescent brain, “is far from being ready-made” but undergoes complex and crucial development, with the changes taking place in the brain during this life period being “so profound, they may rival early childhood as a critical period of development” (Strauch 2003:xiii). There is a gradual decrease in grey matter and an increase in white matter in the brain during adolescence in both sexes (Blakemore & Frith 2005:114-117).

During the period of pre-adolescence to adulthood, the major focus of brain growth is in the prefrontal cortex of the frontal lobes (Blakemore & Frith 2005:114-117; Healy 2004:125). Whereas the earlier maturing areas in the back of the brain act as vast storage areas of information, the front part of the brain acts as a control centre which selects and acts on the accumulated knowledge. The frontal lobes, which are still developing during adolescence, are the part of the brain that helps us resist impulses such as spending all our money on some desired object or saying something we may regret afterwards (Strauch 2003:26-29,35). These frontal lobes play a role in the human ability to inhibit impulses, think things through and plan ahead.

According to Healy (2004:126), the prefrontal areas of the brain become active shortly after birth, experience spurts of growth during the first few years and then undergo “a major explosion of synapses” between the ages of about 11 to 12. Other fibre tracts are also late maturing and studies have found peaks in brain electrical activity at about 12, 15 and 18 to 19 years of age (Healy 2004:126). As this development occurs, the brain

undergoes a process of refining and pruning while the adolescent learns to use these new complex connections. Strauch (2003:204) describes this process as involving an increase in density of the frontal lobes and then an abrupt scaling back, resulting in the “molding of a leaner thinking machine” where the adolescent brain “fine-tunes its most human part, the prefrontal cortex, the place that helps us cast a wary eye, link cause to effect, decide ‘maybe not’ – the part, in fact, that acts grown-up”.

Healy (2004:132) describes the most important function of the prefrontal cortex as being like that of a wet blanket or excitement inhibitor, which prevents over arousal and impulsive behaviour. As the frontal lobes mature, they work together with subcortical structures that control arousal, alertness, emotion and memory, resulting in the formation of loops that act as a “gating system” to select and direct attention. In addition to this, another important function is regulating the ability to use “feedback” which simply means keeping a check on one’s own behaviour, helping one to learn from one’s errors and remember what one should be doing and how one should be doing it. To sum this up, the prefrontal cortex, which is responsible for making decisions and other higher order cognitive functions, is not fully mature in adolescence, while the amygdale, which handles the processing of information regarding emotions, is more fully developed in adolescence. This means that the brain region “responsible for putting the brakes on risky, impulsive behaviour is still under construction in adolescence” (Santrock 2006:392).

The adolescent brain “undergoes a proliferation of connections for the neurotransmitter, dopamine, which is involved in movement, pleasure and alertness” (Strauch 2003:204). High levels may have developed to assist adolescents of different species in taking risks necessary for survival, which could range from exploring new places for food to asking an attractive girl to dance. The connections between brain cells are coated with insulation which serves to speed up signals in the brain areas devoted to emotions and language. In addition, the cerebellum, which is involved in understanding social cues and jokes, blossoms and consolidates during a process which lasts from the beginning of adolescence until well into the twenties. According to Strauch (2003:204), the brain chemicals which control sleep patterns also shift during adolescence – which could have originated from a

time “when the quick-eyed young needed to stay up into the night to protect the rest of us”. Sleep patterns of adolescence was discussed in more detail (see Section 2.2.2.4).

2.3.3 Changes in adolescent thinking patterns and behaviour

Atkinson (2006:4-5) points out that cognitive development during adolescence, which takes place on an inner level, while more subtle than biological maturation, is just as important. The physiological changes of puberty, together with the changing thinking patterns associated with brain development, constitute what he refers to as a “psychic revolution”. Cognitive development, at this stage, means the beginning of a new level of thought, with increases in reasoning and problem solving abilities enabling adolescents to speculate, fantasise, hypothesise and build more sophisticated systems of thought.

2.3.3.1 Decision making

The adolescents’ ability to use abstract reasoning and make their own hypotheses and deductions helps them prepare to function successfully in the adult world where they will be expected to formulate conclusions, exercise judgment and make decisions for which they will be held accountable (Townsend 2006:76-77). Adolescence is a time of increased decision making, with adolescents having to decide about things like: which friends to choose, who to date, whether to have sex, whether to study further, and whether to buy a car (Jacobs & Klaczynski 2002:145). Decision making ability seems to improve during adolescence, with adolescents becoming more likely than children to generate options, view situations from a number of different perspectives, anticipate the consequences of decisions and consider the credibility of sources (Santrock 2006:385).

Jacobs and Klaczynski (2002: 145-149) warn that the ability to make competent decisions does not mean that this will always happen in everyday life, where the adolescent’s lack of life experience often comes into play. Adolescents may still need some assistance when making decisions and parents can play an important role by involving adolescents in appropriate decision making activities, thereby helping them to improve their decision making ability (Santrock 2006:385). Adolescents are also more likely to participate in

family decisions when they perceive themselves as having some say in what happens to them and if they believe that their input would have some influence on the outcome of the decision-making process.

2.3.3.2 Critical thinking

Adolescents may also demonstrate thinking patterns which are more logical, enabling them to be more persuasive, manipulative and often correct in their thinking. Gerdes (1998:154-156) explains that adolescents' knowledge base increases as a result of schooling and contact with different information sources; they become more adept at seeing links between different pieces of information; are able to concentrate for longer periods; and are able to evaluate information – all of which may make them more critical about themselves, parents and others. These increased abilities can result in adolescents becoming more inclined to challenge and argue with parents, teachers and others (Townsend 2006:77).

2.3.3.3 Adolescent egocentrism

Healy (2004:126) warns that along with brain development and burgeoning new possibilities, comes confusion because the adolescent may be able to reason in new and different ways. However, Strauch (2003:203) emphasises that the adolescent's brain is still in the process of unfolding and developing. Early adolescent thinking is reminiscent of a child dressing up in adult clothes, "parading about grandly yet stumbling a little too", but unlike the child, the adolescent experiences accompanying feelings of intense self-consciousness (Healy 2004:127). While the new potential for neural connections enables the adolescent to see a variety of new possibilities in situations, it also enables the adolescent to "step outside and view himself for the first time". This can be very embarrassing, causing the adolescent to be very self-conscious, having the notion that 'everyone' is looking at them. While the adolescents may feel floored by their perceived imperfections on the one hand, they may regard themselves as so special that normal rules do not apply to them.

This type of thinking is referred to as adolescent egocentricity and involves the heightened self-consciousness of adolescents and the belief that their way of doing things is best (Atkinson 2006:5; Gerdes 1998:154-155; Santrock 2006:384-385). This egocentricity is a result of two notions, namely, “imaginary audience and personal fable”. The idea of ‘imaginary audience’ can be described as the adolescents’ tendency to mentally rehearse situations, imagining how various people will react, seeing the self as the centre of attention, believing that others reactions will mirror theirs, and believing that others are as interested in them as they are in themselves. An adolescent girl, for example, will walk into a classroom and think that everyone is looking at her, noticing the pimple on her right cheek. Increased mental abilities may awaken a self-consciousness, which includes worries about the self and social relationships, and which could be so anxiety provoking as to cause adolescents to retreat – sometimes into the “virtual, self-gratifying worlds of video or Internet gaming” (Healy 2004:127). This behaviour can lead not only to depression, social withdrawal, failure at school and health problems, but also may cause adolescents to skip over valuable developmental stages and rob them of the challenges necessary to develop mature cognitive skills.

The idea of ‘personal fable’ refers to the fantasy in which the adolescent occupies a central place, such as hero, rescuer or super star. It involves the adolescent’s sense of uniqueness and invincibility. This results in them having a sense of being immune to the laws of probability and morality, a sense of being invincible and believing things like, ‘this can never happen to me’. This ties in with Healy’s (2004:127) point, mentioned above, that adolescents regard rules as not applying to themselves. They may, for example, believe things like, “I won’t get a sexually transmitted disease or fall pregnant”. Gerdes (1998:155) warns that this type of thinking can promote risk-taking behaviour and because of these notions, adolescents are often inclined to be over-critical of others, or ideas they dislike or disbelieve and under-critical of the “feasibility of their own ideas”. This is discussed in more detail in Chapter Three (see section 3.6.3). Adolescents are able to imagine logical possibilities but may be inclined to attempt to reshape reality when it doesn’t match their hopes and fantasies and might create a story about themselves that is filled with fantasy and far removed from reality (Atkinson 2006:5; Santrock 2006:384-385).

2.3.3.4 Other adolescent thinking patterns

Strauch (2003:32) points out that because the prefrontal cortex, which acts as a kind of “inhibition machine” is not yet fully developed during adolescence, wide differences in the thinking and behaviour of different adolescents and even in that of the same adolescent on different occasions may occur. We may witness, on the one hand, the common impulsive, uninhibited behaviour of adolescence, and conversely, the newfound ability to resist the temptation to act impulsively. While many early adolescents are blind to the consequences of their actions, failing to think ahead, they tend to improve in these areas as they mature.

Healy (2004:127) states that the adolescents’ enlarged mental perspectives may make adolescence more aware of “ideals”. The increased ability to think abstractly often results in them becoming idealistic, with late adolescents often becoming involved in various humanitarian or political causes, even adopting an extremist attitude as a result of their youthful idealism (Gerdes 1998:154). The greater perspective-taking ability of adolescents can result in them being more empathic and taking a new interest in others as well as societal issues (Focus Adolescent Services 2006:7).

Healy (2004:140-141) emphasises the importance of remembering that adolescents’ brains are far from “finished” and that many adolescents seem to “get it together” sometime around age 16. Many psychologists now believe that the increase in adolescent suicide could, in part, be caused by adults forcing adolescents to make choices too soon, having unrealistic expectations and pressuring them into adult thinking patterns. The profound effect of cognitive development during adolescence is summed up by Strauch (2003:203): “A teenager’s brain is still unfolding. Like its owner, it seeks its way, reaching here, stumbling there, pushing out, and pulling back. Just as the Chinese symbol for change means both peril and possibility, the teenage brain, too, holds both”.

2.4 MORAL DEVELOPMENT

2.4.1 Piaget's ideas on moral development

Moral development, according to Piaget (Grant 2002:296-297), involves the progression from heteronomous to autonomous moral reasoning. *Heteronomous moral reasoning* refers to the type of reasoning initially adopted by children and characterised by strict adherence to rules and obedience to authority. Rules are absolute, rigid and not to be broken even when they are inconvenient or unfair. This reasoning is characteristic of children under the age of about ten years old. This reasoning results from the following three main factors, namely:

- the problem of realism (which refers to the difficulty the child experiences in distinguishing rules from real objective phenomena);
- the egocentric nature of the young child's cognitive structure (which means that he or she is unable to see things from a different perspective); and
- the power relationship between adults and children (whereby children are subject to adult authority and respect this authority unquestionably).

Autonomous moral reasoning develops as a result of interaction with other children and is characterised by the ability to examine rules critically and to apply these rules selectively, based on the goals of mutual respect and co-operation. Grant (2002:297) gives the example of rules of a game being changed, with the agreement of participants, if these rules are considered to be inconvenient or unfair.

2.4.2 Kohlberg's theory of moral development

Kohlberg elaborated Piaget's model into a more complex stage theory which shows this progression from a heteronomous orientation in the child's initial morality to an autonomous orientation in the later stages of development. According to Kohlberg (1969:379-382), individuals progress through a series of three levels of moral development,

with each of these levels broken into two sub-levels, resulting in a total of six stages. These stages as described by Grant (2002:297-303) are discussed in the following sections.

2.4.2.1 Level one - The preconventional level

Moral reasoning at this level is determined by external authority or norms and principles which are imposed by those in authority. Acts are perceived as wrong if they are punished and right if they are rewarded. The first stage is characterised by the *obedience and punishment orientation (or heteronomous morality)* in which right is determined by the avoidance of punishment. The second stage is the stage of *individualism, instrumental purpose and exchange* in which right is determined by how one can attain reward as opposed to avoiding punishment. Younger children usually operate at this level of moral reasoning.

2.4.2.2 Level two – The conventional level

Individuals at this level of moral reasoning have come to see rules as necessary for maintaining social order and have come to accept these rules as their own, internalising them, not to avoid punishment but to be virtuous and win the approval of others. The individual is concerned with his or her reputation and moral values are determined by the individual conforming to societal norms, maintaining the conventional social order and fulfilling the expectations of others. Moral reasoning, at this level, is quite inflexible, with rules being regarded as absolute guidelines which must be rigidly enforced.

The third stage is characterised by *mutual interpersonal expectations, relationships and interpersonal conformity* which means that morality is determined by an attitude of approval seeking and is attained by fulfilling the expectations of one's significant others (those closest to one). The fourth stage's orientation is in the *social system and conscience* and regards maintaining the conventional social system as a valuable duty. The individual's moral focus in stage three is his or her significant others but in stage four the individual is concerned with society, the system or the 'institution'. The system is regarded to be of prime importance and one cannot do what one perceives to be right if it conflicts with what the system requires as this would lead to chaos.

2.4.2.3 Level three – Post conventional or principled morality

At this level, moral reasoning becomes internal and autonomous. Norms are based on principles of justice, fairness and dignity and are independent of conventions such as national laws. Stage five's orientation is in *social contract or utility and individual rights* and the concern now is with a good society which arises as a result of social consensus while at the same time respecting certain universal rights. Stage six is the morality of *universal ethical principles* in which individuals work out a personal code of ethics, moral thinking becomes more flexible and rules less rigid. At this level, an individual may not comply with some of society's rules if they conflict with personal ethics.

2.4.3 Moral reasoning characteristic of adolescence

According to Grant (2002:296-297), both Kohlberg and Piaget based their ideas on moral reasoning on the underlying premise that the way individuals think about moral issues is dependent on their level of cognitive development. Atkinson (2006:5) stresses that moral reasoning and its development through stages, is an interdependent component of cognitive developmental stages, with formal operational thought being a necessary but insufficient condition for principled morality (see section 2.4.1.3 above). The adolescent, with the ability to imagine a variety of solutions to social, intellectual or scientific problems, is able to use the same types of thought processes when thinking about right and wrong. Atkinson (2006:5) highlights the important impact that cognitive development during adolescence has on moral reasoning, with adolescents often having an increased ability to see moral issues more broadly, loosening their dependence on narrow personal views and gradually incorporating values of society and beyond.

Contrary to what people believe, moral thinking becomes more conventional in adolescence (Myers 1997:55). Adolescents tend to conform to the rules of the peer group and to what is fashionable. Pienaar, Beukes and Esterhuysen (2006:395) indicate that, according to Kohlberg, the main aspect of moral development during adolescence is the establishment of conventional morality, with this stage being characterised by the

internalisation of the norms and values of society. This conformity to the peer group is a necessary part of moral development, helping adolescents to become part of the society or to belong (Myers 1997:55). Adolescents seem to have a need for some form of external authority and while they may reject parental authority, they may transfer this need onto the peer group or larger society. Pienaar et al (2006:395), in their study of the relationship between conservatism and psychological well-being during adolescence, found that adolescents who are more conservative tend to be more inclined to internalise and conform to the values of the society in which they live.

Atkinson (2006:5) posits that there is a tendency among adolescents to reason at higher levels about moral issues with which they have had personal experience or which they have discussed with others. It thus seems that providing opportunities for adolescents to discuss moral issues and make their own moral decisions can help them develop more complex moral reasoning ability. The highest level of moral reasoning, namely, post-conventional, is possible for adolescents provided that they have reached an adequate level of cognitive development and are given opportunities to experience principled morality (see section 2.4.1.3).

There is evidence of a difference in the way in which men and women make moral judgments; women base their moral decisions largely on the human relationships involved (Atkinson 2006:5). The main consideration, for women, appears to be care and responsibility, whereas it is commonly rules and rights that are important to men. It is important to remember that these differences are not absolute, one is not necessarily better than the other and the highest level of moral reasoning would require a synthesis of both approaches.

2.5 PSYCHO-SOCIAL DEVELOPMENT

According to Atkinson (2006:1-3), in traditional cultures of the past, rites of passage or initiation ceremonies were used to direct individuals through the transition from one social status or life stage to another. While this is still the case in some cultures, many adolescents now have no clear guidelines for passing through adolescence and attaining

adulthood. Since the loss of a socially prescribed rite of passage, there has no longer been a clear beginning or ending to adolescence. While the biological changes that signal the beginning of the transformation from a child to adult have been in place, the social and economic factors that interact with these are constantly changing. Even with this unclear beginning and ending point in the journey to adulthood, there are certain life tasks that the individual has to accomplish. Many in the helping professions are simulating traditional rites of passage experiences in therapeutic or educational settings. These contemporary rituals are aimed at serving the same goals as traditional rites of passage, which are to “guide the individual to a deeper understanding of himself or herself in relation to others and the world so that they are better prepared to carry out their adult roles and responsibilities”.

2.5.1 An overview of the life tasks of adolescence

In order for adolescents to pass successfully through this life stage, they have to achieve certain life tasks such as the following (Gerdes 1998:153):

- adapting to a changing body;
- developing a sense of identity;
- becoming increasingly independent from parents;
- establishing future goals (such as education and career decisions);
- developing personal insights and opinions which will help one make choices;
- developing mature social relationships with peers (of both sexes);
- preparing for socially responsible relationships, which serve as preparation for marriage and family life; and
- establishing personal values, which includes ideas of what is morally right or wrong (that is, developing a personal belief and morality system).

Pienaar et al (2006:394) concur with the above-mentioned life tasks of adolescence and add one more to the list, namely the “accomplishment of intellectual tasks needed for effective functioning”. Atkinson (2006:6) sums up these life tasks in his description of the “psychosocial self”. As the adolescent moves closer to maturity, certain levels of adequacy need to be established. Firstly, a sense of individual maturity, which includes self-control,

self-esteem and self-initiative, needs to be achieved. The next level is interpersonal maturity, which involves the ability to communicate, trust, understand and manage relations with others. Lastly, there is social maturity which means being open to the notion that things change and an acceptance of differences among people. The “psychosocial self” is the “total configuration of the individual and the personality mechanisms that integrate him or her” (Atkinson 2006:6) and successful identity formation is imperative for this to occur. Identity formation will be discussed in greater depth in section 2.5.2.

2.5.2 Identity formation

2.5.2.1 The process of identity formation

Erikson (1963:273) proposed a series of eight developmental stages stretching over the human life span. Each stage is defined by a developmental life task, crisis or challenge to growth which needs to be resolved in order to move to the next stage and to continue a healthy pattern of development. At each life stage, individuals have a choice between two opposing “development opportunities”, one would mean a positive and the other a negative development in personality – or what Erikson refers to as a loss or gain of an “ego-strength” (Cowan 2004:4). The successful completion of each life stage means that “a new strength is added to a widening ensemble of life skills” (Erikson 1969:52).

The psycho-social stage coinciding with adolescence is known as the stage of identity versus role confusion (Erikson 1963:273). The major life task of adolescence is to solidify different elements of the childhood identity and form a clear personal and vocational identity, with failure to do this resulting in role confusion or identity diffusion (Cowan 2004:4). As Black (1996:55) explains, adolescence is a time when one is no longer a child but not yet an adult, it is a “no-man’s land of personal identity”, with many losing their sense of direction, place and belonging. Puberty results in rapid bodily growth and important anatomical changes which means that mastery of the body, previously achieved, must now be “re-accomplished” (Hook 2002:279). This is also the case for a variety of psycho-social skills, with adolescents, for example having to face strong sexual

urges and having to find their place in a social matrix which differs much from the one of childhood.

Adolescents become aware of themselves as separate members of society and have to work out who they are and how they fit into different social settings (Myers 1997:22). They become aware that behaviour differs from one group or setting to another and moving from one role to another can be quite confusing, especially when faced with two roles simultaneously. For example, an adolescent who may find himself with his friends and his mother, could feel torn between which role to play, son or friend, with this being a particular problem “if the young person doesn’t have a ‘me’ who can bridge the gap” (Myers 1997:22).

This life task requires adolescents to discover the answer to the question: ‘Who am I?’ which involves a process whereby they have to separate from parents, successfully establish a sense of who they are apart from their parents, and feel secure and happy as independent individuals (Cowan 2004:4-5). Atkinson (2006:6) describes successful identity formation as a process whereby the individual is gradually able to assimilate the variety of changing self-images experienced while growing up, with identity acting as the bridge between individual and social reality, giving the individual a sense of meaningfulness and self continuity. This means that identity ultimately includes “establishing a sexual, political, moral, religious, and vocational identity that gives one a sense of direction, commitment, trust in a personal ideal, and individual uniqueness” (Atkinson 2006:6).

The main challenge in establishing a secure sense of identity is to bring together the various facets of the self, namely identifications, object-choice decisions, talents, skills and multiple social roles; with the main tension being in “holding together this diffuse and dispersed array of possible identifications, in trying to assemble and integrate the disparate rudiments of an identity” (Hook 2002:279-280). In the section 2.5.2.2, a closer examination is made of the various aspects or identities which make up the global identity of the individual.

Hook (2002:280) stresses the difficulty involved in the adolescent's task of trying to sort out various roles in a way that allows for a certain similarity in attitudes and values and which requires the adolescent to co-ordinate a sense of wholeness and self-consistency with an increasing perception of the self as being distinct and separate from others. Identity formation requires some form of stability, which means some sense of sameness or continuity, holding together the individual's past history and possible future, thereby providing the necessary sense of confidence to the developing identity of the adolescent. The resolution of the identity crisis, with the accomplishment of a healthy sense of self, may only be achieved well into adulthood or once the values and goals set by parents and society are either accepted or rejected as one's own (Atkinson 2006:6).

There appear to be three main challenges facing the adolescent which makes the task, of resolving "identity versus role confusion", more difficult (Cowan 2004:5-7). These are accepting, liking and adapting to their new bodies in the face of social ideals of what their bodies should look like; handling their sexual maturity and associated peer and parental pressure and/or expectations; and achieving the social expectation of making a career choice. Cowan (2004:7) stresses the enormity of achieving these three tasks all at once and at the same time of having to find their identity and emerge as responsible young adults. In Chapter Three (see section 3.6) the challenges involved in the adolescent's quest for identity, which necessarily involves separation from parents and often results in behaviour which causes conflict with family and society, are discussed.

2.5.2.2 Different aspects of identity

As discussed above, identity is a multi-faceted concept (see section 2.5.2.1). Santrock (2006:398) describes identity as a "self-portrait composed of many pieces". These pieces or different aspects of identity include:

- a *vocational or career identity* (which refers to the career or work path that one chooses);
- a *political identity* (which refers to one's political ideology, for example whether one chooses to be conservative, liberal or moderate);
- a *religious or spiritual identity* (which refers to one's spiritual beliefs and values);

- a *relationship identity* which refers to one's friendship status (for example, whether one has close friendships, acquaintances or feels excluded from social circles) or marital status (for example, whether one is single, married or divorced);
- an *achievement or intellectual identity* (which refers to the degree to which one is motivated to achieve or pursue intellectual endeavours);
- a *sexual identity* (which refers to one's sexual orientation, for example, whether one is heterosexual, homosexual or bisexual);
- a *gender identity* (which refers to the extent to which one is feminine, masculine or androgynous);
- a *cultural or ethnic identity* (which refers to one's ethnic group, one's country or region of origin and the extent to which one identifies with one's cultural heritage);
- an *interest identity* (which refers to the pursuits or activities which one enjoys, such as sports, music, hobbies, and the like);
- a *personality identity* (which refers to one's personality characteristics, for example, whether one is introverted or extraverted; anxious or calm; friendly or hostile); and
- a *physical identity* (which refers to one's body image).

Identity formation is a lengthy process, which is not confined to adolescence. Certain aspects of identity are more prominent than others during adolescence and some of these are now discussed in a little more detail.

Vocational and career identity comes to the fore during adolescence. It is during the adolescent years that individuals begin to choose school subjects and particular types of schools, colleges, courses or universities, and begin to take their first steps along certain career or work paths. The task of choosing a career becomes more urgent during late adolescence as schooling nears to an end (Gerdes 1998:175). Sometimes a role or identity is determined by tradition, for example, when a child is expected to take over a parent's business or when a social position is inherited (Gerdes 1998:160). Adolescents may be attracted by several different careers or work types and may want to explore numerous avenues before making a final choice. Others have a strong sense of what role they want to play and pursue certain vocational or personal goals with passionate commitment. Still others may not seem to have any sense of the direction, or may need more time.

Atkinson (2006:6) stresses that religious beliefs, values and an idea of one's *spiritual identity* tend to become more focused during late adolescence. While traditionally adolescence was often regarded as a time during which society would clarify religious beliefs for individuals especially through initiation ceremonies, contemporary societies (although having modern equivalents such as the Christian confirmation or Jewish *bar mitzvah*) seem to be less concerned with the strict observation of religious customs. There also appears to be a tendency, especially during late adolescence, towards an independent exploration and search for truth, which involves the re-examination and re-exploration of values and beliefs with which the individual has grown up, resulting in a more "personalised spiritual orientation" which often co-incides with the original affiliation or belief system.

Adolescence is "a central stage during which the young adult requires gender and sexual identities" (Shefer 2004:78). Adolescents experience pressure to fit in with stereotyped gender roles. Gerdes (1998:161) stresses two aspects of *gender identity*, namely an increased flexibility in gender identity and the important role that the father plays in the gender identity of his offspring. The increased gender flexibility can be seen, for example, in a wider vocational choice, with certain careers no longer being regarded as solely for males or solely for females. A father's approval and respect can help affirm "the emerging womanhood of his daughter" and prevent her from seeking affirmation from other men, while a son's masculinity also needs to be affirmed by his father. In addition to this, there appears to be a link between a lack of fathering and aggression in adolescent boys, with such boys appearing to try to stress their masculinity through rough, tough, aggressive behaviour.

Sexual identity appears to be interwoven with gender identity, with different sexual behaviours and roles being expected of adolescent men and women. Shefer (2004:78) stresses that South Africa, despite protecting the rights of all sexual orientations and like most of the rest of the world, "remains a homophobic and heterosexist society" with those adolescents who 'come out' as gay or lesbian being faced with many difficulties and challenges.

Physical identity or body image becomes very important during adolescence, as young people come to terms with their changing bodies. As discussed above (see section 2.2.2.2), adolescents are often highly conscious and critical of their bodies. Many girls are concerned with being too fat, even when their weight is normal. Many boys are concerned with being too short. These concerns with physical identity often lead to psychological problems such as depression and eating disorders (see section 3.6.8).

2.5.2.3 The ego-strength resulting from successful identity formation

Solving the identity crisis is an important life task enabling the adolescent to establish a strong sense of identity, knowing “who he is and where he is going” (Myers 1997:23). The “ego-strength” or personality strength which, according to Erikson’s theory, develops from the successful resolution of this identity crisis is known as reliability or fidelity (Cowan 2004:7-8). This strength can be defined as the ability to be “responsible, trustworthy and faithful ... more able to cope with interpersonal relationships, accepting responsibility and the challenges of adult life” (Cowan 2004:7). A sense of identity shows consistency over time, although it may be altered and adjusted as a result of changes, new insights or challenges (Gerdes 1998:160).

2.5.2.4 The dangers of role confusion and identity diffusion

Atkinson (2006:6) explains that adolescents who fail to successfully resolve this developmental crisis experience role confusion, (the failure to formulate a clear, consistent, integrated identity) and identity diffusion (an inability to commit oneself to an occupation, ideological position or to take up a responsible approach to life). Such an individual is likely to experience difficulty in commitment, responsibility and interpersonal relationships (Cowan 2004:5-6). Erikson was firm in his belief that a sense of identity must be firmly established before true intimacy with others can occur, as intimacy can be threatening to one with an uncertain identity or may cause one to over-identify with someone else (Gerdes 1998:160).

There are a number of different ways in which role confusion can present itself in the life of the adolescent. Here follows a brief outline of some adolescent struggles with identity formation and experiences of role confusion (Hook 2002:280-284):

- **Overidentification** which refers to an overzealous identification with another individual or group so that one's own identity is almost completely lost. It refers to the excessive emulation of idols, heroes or specific cliques and the strict adherence to particular dress codes, habits and behaviours. Closely associated with this is the choice of signs which will determine which individuals are 'in' (accepted) or 'out' (rejected).
- **Moratorium** which refers to a time of experimentation with various ideologies and careers until one is able to attain a firm choice of identity. Failure to integrate a final identity, "bring one's moratorium to a productive close" or resolve conflicts between roles with opposing value systems can cause ego diffusion (which refers to the inability to establish a stable sense of self) or to the next point under discussion, namely identity foreclosure.
- **Identity foreclosure** refers to the situation in which an individual commits to a certain identity too early, with little evidence of a crisis and without sufficient exploration of different possible identities. An example of this would be an adolescent who is committed to become a lawyer because his father and grandfather are lawyers.
- **Negative identifications** which refers to the choice of an identity which is opposite to the one suggested by parents and society. Here ego diffusion leads to social withdrawal or alienation of those unable to integrate themselves within the social structure and values of their culture.

2.5.2.5 Contemporary views of identity

Contemporary views of identity formation suggest that it is a lengthy process; more gradual and less cataclysmic than implied by Erikson's term 'crisis'; and exceptionally complex in nature (Kroger 2003). It neither begins nor ends with adolescence (Sanrock 2006:398-399). The process has its beginnings in infancy with the process of attachment and the emergence of a sense of self and of independence. The process ends with life

review and integration in old age. Adolescence, especially late adolescence, is an important period in the identity process because “for the first time physical development, cognitive development, and social development advance to the point at which the individual can sort through and synthesize childhood identities and identifications to construct a viable pathway toward adult maturity” (Santrock 2006:399). Resolution of identity does not happen once during adolescence and then remain stable over the remainder of an individual's life. Healthy identity formation means being flexible and adaptive and open to changes in the different aspects of one's identity (see section 2.5.2.2). This means that many re-organisations of identity features occur throughout the life of an individual who has achieved identity.

Therefore, identity formation, according to contemporary views, does not happen simply or suddenly. Identities are developed in ‘bits and pieces’ and decisions concerning these identities are not made once and for all, but rather need to be made over and over again and at the very least involves a “commitment to a vocational direction, an ideological stance, and a sexual orientation” (Santrock 2006:399). Over the years, the adolescent begins to make decisions which begin to form his or her identity or the “core of what the individual is all about as a person”. These decisions may even seem trivial at the time and can include choices such as, who to date, whether or not to take drugs, whether to study further or work; whether to have sexual relations, and so on.

2.5.2.6 Family influences on identity

Santrock (2006:400) reports on research that reveals the important role which parents and family play in the adolescent's development of identity. Firstly, parenting styles (see section 3.4) can affect identity development in the ways described below.

- Autocratic parents (who control adolescents, not permitting them to express opinions) encourage identity foreclosure (see section 2.5.2.4).
- Permissive parents (who fail to give guidance and allow them to make all their own decisions) promote identity diffusion (see section 2.5.2.4).

Secondly, a family atmosphere which encourages individuality and connectedness is important in the development of identity during adolescence. Individuality consists of two main parts, namely, self-assertion (the ability to hold and communicate an opinion) and separateness (the ability to use communication patterns to express individuality). Connectedness also has two components, namely, mutuality (sensitivity to, and respect for, the perspectives of others) and permeability (an openness to the opinions of others). Research findings have revealed that identity formation is promoted by family relationships that are individuated (helping adolescents to develop their own opinions) and connected, thereby providing adolescents with a secure base from which they can venture into wider social circles outside the home.

2.5.3 Establishing a sense of psychological well-being

Adolescence can be a very difficult life stage because so many changes occur in such a short period and adolescents are often left feeling “confused, frightened and lacking in confidence” (Sharry 2002:117). Physical changes can make them feel self-conscious and awkward; emotionally they may experience extreme mood swings; it is a period when hormonal changes can result in alarming sexual feelings; intellectually they are able to think about things critically and analytically and may begin to recognise inadequacies in the parental or adult world which they may be keen to point out; and they may also be concerned about the meaning of life and their own life purpose (Sharry 2002:117; Townsend 2006:75-78). Self-image can be challenged by body changes and social comparisons, with both boys and girls commonly being concerned about skin problems, height, weight and overall appearance (Focus Adolescent Services 2006:5).

Self-knowledge and self-image become of prime importance during adolescence, with shifts occurring in the way adolescents think about and characterise themselves (Atkinson 2006:6). Adolescents are increasingly interested in understanding themselves, their behaviour and factors affecting their personality. Adolescents become concerned about matters such as, how they are viewed by others, their ability to perform well, confidence, a sense of worth and of personal control. How one sees oneself is a “critical aspect of the psychosocial self, as well as the biological and cognitive selves”. As adolescents move

towards increased emotional maturity, they undergo complex emotional and personal changes which include (Townsend 2006:77):

- a need to be both independent of, and dependent on, parents;
- a questioning of family beliefs and values and a challenging of authority;
- feeling more confident about personal dislikes than likes;
- intense and extreme emotions which affect judgment; and
- a tendency to invest in the present with less interest in the future, and a difficulty in postponing gratification.

According to Focus Adolescent Services (2006:5-8), earlier on in adolescence the psychological or emotional life tends to be characterised by an intense self-focus, which includes concern over others' opinions of them, increased desire for privacy and sensitivity about physical appearance; frequent mood swings, with excessive alone time sometimes contributing to moodiness; and heightened forgetfulness. Psychological traits of late adolescence, include an increase in empathy for some; greater vulnerability to worrying, depression and concern for others, especially among girls; and an increase in responsible behaviours. Recent studies show that while adolescents' feelings about themselves fluctuate, and self-image tends to be lower during early adolescence, self-image tends to gradually become more stable and positive during late adolescence. The fact that older adolescents are more self-confident, open to others views and feelings, and appear to have a more balanced view of their families than younger adolescents, supports the idea of adolescence as a stage which "encompasses a process of increasing maturity, knowledge and self-confidence" (Atkinson 2006:6).

2.5.4 Developing mature social relationships

2.5.4.1 The importance of the peer group

Adolescents are usually strongly drawn to peer groups, with same sex groups usually being preferred in early adolescence but with participation in groups comprising both sexes being gradually more common later on (Gerdes 1998:164; Santrock 2004:81). Peers play an important role in identity formation as different behaviour patterns are tried

out in the group. Many adolescents become members of cliques (which are small groups that range from two to twelve individuals and average about five to six individuals) and which provide an opportunity for adolescents to share ideas, spend time together and develop an “in-group” identity, often believing that their clique is superior to others (Santrock 2006:409). Adolescents often have a high allegiance to these cliques, with such cliques exerting a powerful influence over their lives, sometimes even resulting in the group identity of the clique overriding the personal identity of the adolescent (Santrock 2004:83).

Adolescents also belong to crowds, which have more members and are less personal than cliques, and are often defined by their activities, for example, ‘jocks’ who are involved in sports (Santrock 2006:409-410). Crowd membership has also been shown to be associated with self-esteem. On the one hand, self-esteem could increase an adolescent’s chances of being accepted by a particular group and on the other hand, crowd membership could result in an increase in the adolescent’s self-esteem.

Townsend (2006:77) explains that the focus of the adolescent’s life shifts from family to the peer group, with friends often becoming the prime interest and central part of the adolescent’s life. Adolescents spend increased amounts of time interacting directly with friends or communicating via telephone or instant messaging on cell phones. During adolescence, friends become increasingly depended on to satisfy basic social needs such as the need for tenderness (or secure attachment), playful companionship, social acceptance and the need for intimacy (Berndt 2002: 7-10). Whether these needs are fulfilled, largely influences emotional well-being, and therefore the positive and negative experiences adolescents have with friends, plays a major role in shaping their emotional well-being. For example, adolescents whose need for playful companionship remains unmet may become bored and depressed; and the adolescent whose need for social acceptance is thwarted, may suffer a lowered sense of self-worth. During early adolescence, the need for close friendships intensifies and adolescents who fail to develop such bonds may experience loneliness and a reduction in feelings of self-worth (Santrock 2006:408).

Research has shown that while this shift from family to friends may be difficult for parents, leaving them feeling unloved or rejected, this is a vital step in the psycho-social

development of adolescents, helping them to develop individual identities separate from their identity within the family, engage in cross-gender friendships, try out different behaviours within a social group context and connect with the broader society (Focus Adolescent Services 2006:8; Gerdes 1998:165; Shefer 2004:80; Townsend 2006:78). Adolescents who fail to make this shift from family to friends often experience difficulty with employment, dating and friendships when they leave home as “they are still tied into the home environment and don’t have the tools to function outside of it” (Townsend 2006:78).

Shefer (2004:80) states that peer group pressure or the need for adolescents to conform to peers can be both negative and positive in nature. Peer groups may inspire pro-social behaviour and provide opportunities for growth. Conversely, anti-social peer groups may increase anti-social behaviour of individual adolescents, with some of the risk areas for adolescents, such as pregnancy, substance abuse and violence, being areas where peer pressure plays a large role. Peer pressure is discussed in more detail in Chapter Three (see section 3.6.4). In addition to this, an adolescent’s acceptance and popularity in the group have a marked influence on self-esteem. Adolescents who experience rejection by the peer group (e.g., because they lag in physical and emotional maturity or are perceived as ‘different’ or not adequately conforming to the group) could experience problems with self-esteem, identity formation and social relationships (Gerdes 1998:165).

2.5.4.2 Dating

Dating and romantic relationships become very important during adolescence (Santrock 2006:410-412). This new aspect of an adolescent’s social life can be particularly challenging to parents and is therefore discussed in Chapter Three (see section 3.6.6).

2.5.4.3 The parent-adolescent relationship

During adolescence, attachment to parents remains strong but connectedness is often not that smooth (Santrock 2006:405). Shefer (2004:80) explains that while parent-adolescent conflict has received much attention in literature on adolescent development,

it can be argued that this conflict has been over-emphasized and is not necessarily a universal phenomenon. This is discussed in more detail in Chapter Three (see section 3.6.1). When this conflict occurs, it frequently involves adolescents becoming disillusioned with their parents and/or parents attempting to hold onto their control or authority over adolescents. Adolescent's friendships are often a source of conflict between adolescents and their parents, with adolescents often feeling resentful of parental interference and restrictiveness, while parents are more concerned about protecting adolescents from potential risks and bad influences (Gerdes 1998:165).

This parent-adolescent conflict can be beneficial, helping adolescents to work through issues and develop into autonomous adults (Santrock 2006:405). Sharry (2002:118-119) believes that parents should not see adolescence merely as a crisis period, but also as a period of opportunity, with the parent having the opportunity to start building a different kind of relationship with their child – one which is “more adult and equal”. Adolescent rebellion should not be seen as a personal attack on parents but as a necessary stage during which they have an opportunity to “forge their separate identity”. Parents who stay involved can thus help their adolescent offspring as they establish their own values and ideas, sharing in their journey from childhood to adulthood, helping them to keep coming back on course and to grow into responsible, independent, healthy adults.

2.5.4.4 The importance of wider social interaction

Social interaction plays an important role in the well-being of the adolescent (Shefer 2004:80). Adolescents need to be accepted, ‘belong’ and have a place in the wider society but most adolescents, at some time or another, feel that they do not belong and this causes intense emotional pain (Mussen et al 1984:499). Smith (2003:167-168,172) stresses that one of the most remarkable changes for millennial adolescents, defined as those born between 1982 and 2002 is their aloneness, with mothers at work, neighbours who are strangers, relatives not living close by, non-traditional families being more common (including single parent families, divorced families and blended families) and the community playing a decreasing role in the raising of adolescents. Many millennial adolescents are surrounded by other adolescents but “devoid of any meaningful

interaction with adults” and they need emotional support and adequate role models to enable them to achieve the life tasks (see section 2.5.1) of this developmental stage (Smith 2003:197-206).

2.6 CONCLUSION

From the above literature study, it can be seen that the adolescent experience involves the biological, cognitive and psycho-social changes that occur during this life period. Biological development is universal, with key changes distinguishing childhood from adolescence, but with differences in individual timing and experience requiring different types and degrees of personal adaptation to these changes. In the same way, cognitive changes centre round the development of formal operational thought, with there being vast individual differences in the timing and degree to which this type of thinking is achieved. Psycho-social development also encompasses universal life tasks such as forming a clear view and understanding of oneself, separating from parents, relating well to peers and establishing a personal and social identity. Once again, there is much individual variation in the accomplishment of these tasks, with adolescents having to contend with the lack of a clearly defined social recognition of adulthood and when it is fully accomplished. Atkinson (2006:8) contends that the well adjusted adolescent is the one who understands these developmental changes and who has the support of parents who offer assistance when needed but who allow the adolescent to be independent enough to be challenged by these tasks.

Whereas the focus in this chapter has been on the adolescent and adolescent development, in chapter three the focus moves to the role of the parent. In chapter three an exploration is made of the role, tasks and characteristics of the parent, with the main focus being on the challenges of a parent guiding a child through adolescence.

CHAPTER THREE

PARENTING ADOLESCENTS

3.1 INTRODUCTION

Whereas the previous chapter focuses on the adolescent, this chapter examines the parents of adolescents. Firstly, an attempt is made to discover the role of these parents, which includes parental goals and/or responsibilities. An examination is made of the common adolescent emotional needs which parents may need to address, in order to effectively fulfill their parenting role. Secondly, we look at the different styles of parenting and the characteristics common to parents of adolescents. The study then examines some specific challenges often involved in parenting adolescents. Lastly, an attempt is made to identify the influence of family structure and dynamics on the parenting role. This includes an examination of the effects which divorce, single parenting and the reconstructed family have on the parenting of adolescents.

3.2 THE ROLE OF PARENTS OF ADOLESCENTS

Parents are responsible for protecting and guiding children, in such a way that they are able to become successful adults in all aspects of their lives (Caldera 2005:83). This means that parents need to take responsibility for the physical, emotional, social and intellectual needs of their children. According to Renshaw (2005:7-8), parents need to take responsibility for:

- the physical care of their children, providing them with protection, nutrition, shelter and medical care;
- the teaching of customs, social skills and the difference between what is morally right and wrong;
- the emotional care of the children, providing them with love, acceptance and recognition and ensuring that their emotional needs are met;

- meeting the intellectual needs of their children, helping them with language, learning and the multitude of life skills necessary to function productively in society; and
- helping their children to grow and mature and to become self-supporting and independent.

Sharry (2002:6) states that the long-term goal of parenting is helping one's children "to grow into responsible adults who are independent and confident but also appropriately connected to their family and able to form their own intimate relationships in the future". Two main parental functions thus emerge, that of firstly, playing an active role in optimally developing the individual potential of one's children, and secondly, of ensuring that one's children are able to adapt well socially and become productive, mature adult members of society. Cowan (2004:1) sums this up by describing the role of parents as that of facilitating a process whereby adolescents grow up to be "happy, responsible, trustworthy and compassionate adults".

Covey (1997:367) and (Sharry 2002:6-7) have compared family life to going on a plane journey together. From the outset, there is a desired designation and a navigation plan, but just like wind and rain can throw a plane off-course, a family is subject to numerous factors which can throw them off course. Covey (1997:367) says, "Good families – even great families are off-track 90% of the time!" He explains that the most important thing is that one keeps returning to one's original course or flight plan, keeping the destination in mind and not allowing circumstances to permanently throw one off course.

The metaphor of the plane journey can be a helpful way of helping parents to understand the parenting role (Sharry 2002:6-7). At birth, the parent is "in the pilot seat and very much in charge of the controls". As the child gets older, the parent needs to bring the child "into the cockpit" and begin to teach him/her how to work the controls, with the child gradually been given the opportunity to make certain decisions and to "do some flying under the supervision of the parent". Once the child reaches the adolescent phase, he needs to "take the first steps of flying his own plane". The parent's role is thus that of 'co-pilot'. A good 'co-pilot' needs to be "there for their children and teenagers,

offering encouragement and guidance, letting them learn from mistakes and achievements, and handing over, one by one, the responsibilities of being an independent adult”.

The role of the parent is thus determined to a large extent by the particular life phase of their child. The needs and life tasks of the child change in accordance with the child's life phase and the parent's role is to provide the support, guidance and assistance needed for the child to successfully achieve life tasks and have his/her needs met (Renshaw 2005:7-8; Sharry 2002:115-117). While adolescents become increasingly less dependent on their parents to fulfill certain needs, such as physical needs (e.g., personal hygiene, nutrition and health) and increasingly take responsibility for their school work, choices and actions, they need parents to provide the practical and emotional support which will meet the adolescent's emotional needs and empower them to adapt to the changes, and tackle the life tasks of adolescence. Cowan (2004:2) states that in order for parents to fulfill their role, they have to have insight into and understanding of adolescent needs (see discussion in section 3.3). These needs are determined, to a large extent by the physical, emotional, intellectual, moral and social changes which occur during adolescence (see Chapter Two) and the accompanying life tasks (see section 2.5.1) which adolescents are expected to achieve.

The main life task of adolescence (see section 2.5.1) is the development of a clear sense of identity (Gerdes 1998:153; Santrock 2006:398-402). This identity is a self-portrait composed of many aspects (see section 2.5.2.2) and in order to establish a clear identity, adolescents need to try out or experiment with various roles and identities from their surrounding culture. This requires them to become increasingly independent of their parents, separating from them and establishing their own personal values, goals and beliefs. Cowan (2004:8) stresses that parents must always keep in mind what the adolescent is trying to achieve and that this cannot be achieved by “kowtowing to parents' and society's norms and values” but rather by having to “question, challenge and experiment to establish their own values and norms”.

The struggle to separate, adapt to all the changes and establish an identity often causes behavioural changes that can be challenging to parents. Rebellious behaviour, according

to Sharry (2002:118-119), should not be seen as a personal attack on parents but rather as a way in which they 'forge their separate identity'. Adolescence is a stage fraught with uncertainty and high social demands, parents are often unaware how difficult and important this life stage is, and social issues such as alcohol and drug abuse add to the pressure felt by both parents and adolescents (Cowan 2004:8). In the light of this, it is important that parents strive to provide a supportive environment for the adolescent's struggle, instead of "one which is fraught with fighting, misunderstanding and mistrust" (Cowan 2004:8).

The parental role thus changes during adolescence which is a time during which parents may start to build a different kind of relationship with their child – one which is 'more adult and equal' (Sharry 2002:119). By staying involved, supportive and meeting their needs (see section 3.3), parents can help their adolescent children as they establish their values and ideas and can share in their journey from childhood to adulthood. In discussing the flying metaphor, Sharry (2002:7-8) mentions three main difficulties parents may have in their 'co-pilot' role. Some may doubt their children's ability to fly safely and continually take back controls and take over flying; others may tend to be critical and may undermine their children's efforts to fly or never "release them to fly in the first place"; and others may fail to assist their children at all, leaving the children to learn the skills needed from others such as friends or television. Effective parents would be those who realise that they are not meant to remain in the 'cockpit' and that their ultimate aim would be for their children to "fly their own planes". The children are then able to learn the "vital task of being an adult", with their 'co-pilot' parents remaining "present, involved and supportive".

3.3 ADOLESCENT EMOTIONAL NEEDS TO BE MET BY PARENTS

Most books on parenting include a section on the emotional needs of the child, which are expected to be met by parents. Theraplay (Jernberg & Booth 1999), a play therapy technique which I use in my practice and which underpins my approach to working with children and adolescents, provides a very useful framework for this discussion on the needs of children and what these needs require of parents. While different studies and

books highlight different needs and while most mention a wide variety of needs, theraplay focuses on four main needs which are referred to as the four dimensions or pillars of a strong parent-child relationship (Jernberg & Booth 1999:343-350). As can be seen below (see 3.3.1 - 3.3.4), findings from other research can be incorporated under these four dimensions.

3.3.1 The need for nurturance

Adolescents are often self-conscious about receiving nurture, but they are especially needy of it (Jernberg & Booth 1999:349). The parent needs to behave in such a way that the adolescent receives the message, "You are lovable and I will respond to your needs for care, affection, and praise" (Jernberg & Booth 1999:19). This means that adolescents need to know that they have unconditional love and acceptance from their parents. Parents need to be warm, gentle, soothing, calming and comforting. Smith (2003:47-72) refers to this need as a 'cry for love' and stresses that parents need to find ways to communicate this love to their adolescents. Touch is one important way of communicating love so parents should give their adolescents hugs and back rubs, tickle and wrestle with them, and give them 'high fives' or pats on the back. Different people have different 'love languages' or ways in which they communicate and receive love, making it important for parents to identify the primary 'love language' of their adolescent children (Chapman 1995:163-170; Ezzo & Bucknam 2000:143-150). These love languages are:

- words of affirmation and encouragement (which means showing love through verbal affirmation);
- acts of service (which means saying "I love you" by doing things for them);
- gifts (which means showing love through the giving of gifts);
- quality time (which means showing love by spending time focusing on them and interacting closely with them); and
- physical closeness or touch (which means expressing love by touching, hugging, holding hands and sitting close to them).

While parents need to employ all these love languages in their dealings with their children, finding and using their child's primary love language can ensure that their adolescent feels loved. Parents need to acknowledge (or attend to), accept, respect, value, appreciate and admire their adolescents as this will help to make them feel loved (Damico 1997:132-140; Gage 1999:18-29). This may be difficult for parents as adolescents' attitudes and behaviour can often be annoying and obnoxious (Smith 2003:68).

3.3.2 The need for structure and security

Smith (2003:73) stresses that the need for security is a basic need, with adolescents needing to feel safe before they develop higher needs such as the need for belonging, a purpose and identity. This 'theraplay pillar' is referred to as 'structure' (Jernberg & Booth 1999:17-18 & 344-345) and the parent needs to give the adolescent the message, "You are safe with me because I will take good care of you". This need is met when parents provide adolescents with clear expectations, boundaries and rules.

Adolescents need to know that parents can be trusted and this is achieved by parents who are consistent and who confidently take responsibility and control in the home, ensuring that they keep their word. Parents need to be trustworthy, predictable and should try to assist the adolescent to define and clarify their experience. It is also important that adolescents feel trusted by their parents (Damico 1997:132-133; Smith 2003:23-40), in this way the need for mutual trust in the parent-child relationship can be fulfilled. When adolescents think about security, they often stress the need for stability, consistency, reliability and dependability (Smith 2003:77). They live in an unstable world, where even their bodies are changing and where many of them have experienced the turmoil of divorce and living in single-parent or blended families (see section 3.7).

3.3.3 The need for engagement

It is important for parents to interact or engage with adolescents (Jernberg & Booth 1999:18-19 & 347-349). When parents do this, the adolescent receives the message, "You are fun to be with. You can interact in appropriate ways with others. You can be close to

others.” In order to promote engagement, parents need to provide excitement, motivation and stimulation. This means that parents need to spend time with their adolescent children, not just interacting during daily activities (like taking them to school), but also having fun with them (like hiking together or playing games). Adolescents need to feel connected to their parents and this seems to be a challenge in modern society, where parents are often disconnected from their neighbours, other parents, the community and even from their own children and spouses – often because of busy, independent life styles (Smith 2003:168). Adolescents need to be heard and this means that parents need to foster healthy communication in the home (Smith 2003:131-157).

3.3.4 The need for a challenge or a purpose

According to Jernberg and Booth (1999:17-20), the ‘challenge pillar’ in a healthy parent-child relationship, gives the child the message, “You are capable of growing and making a positive impact on the world”. Parents encourage the adolescent to move ahead, strive a little and to become increasingly independent. Adolescents are thus helped, by their parents, to accept challenges, to have realistic self-expectations and to have confidence in their ability to learn and achieve success. The passive adolescent with low self-esteem benefits from being challenged to attempt activities, especially fun activities, where parents provide a supportive, encouraging atmosphere. Smith (2003:101-129) refers to this need as the adolescent’s “cry for purpose”. When it comes to purpose, parents often do not know how to give direction and guidance to their adolescents, and adolescents often seem unable to ask for guidance or are perhaps even unaware that they may require some help. Adolescents who do not have a sense of purpose or meaning are more likely to abuse alcohol and drugs in an attempt to ‘escape’ or cope with what seems to be a meaningless existence.

While nurturing is a pillar which may come quite naturally to mothers, fathers are the child’s link with the world outside the home and they need to ensure that the adolescent learns to feel confident and capable of making their mark in this life. They thus need to ensure that the ‘challenge pillar’ is strong in their homes. The phenomenon of the ‘absent

father' can have detrimental effects on the lives of children, especially adolescents. Smith (2003:115-117) stresses that divorce and single parenting often mean that children grow up without fathers, with 40% of children in the United States living in homes where the father is absent. Adolescent boys who grow up without fathers "are notoriously prone to crime", with 72% of adolescent murders and 70% of long-term prisoners coming from homes in which fathers are absent. Even if they do not become involved in crime, fatherless boys are two to three times more likely to drop out of school or to have failed marriages in later life. Adolescent girls, whose fathers are absent, are two to three times more likely to conceive a baby out of wedlock.

This need for purpose and meaning spurs adolescents on to achieve the life tasks of adolescence (see section 5.1). By fulfilling this need, adolescents are helped to achieve a strong sense of identity and to become independent and valuable members of society. It can thus be seen that by meeting the emotional needs of their children, parents go a long way toward achieving their role as parents (see section 3.2).

3.4 PARENTING STYLES

According to Santrock (2006:267), the styles parents use when interacting with their children, constitute an important dimension of parenting. Parenting involves interpersonal skills and emotional demands, with most parents learning parenting practices from their own parents (some which they accept and others which they reject) and with husbands and wives often bringing differing perspectives of parenting into the marriage.

Four main, different parenting styles were identified by Baumrind (1968:255) and since then many other researchers seem to have agreed with this division, although sometimes giving alternative terms to describe these four style categories (Carr-Gregg 2005:24-25; Cowan 2004:93; Emery 2004:208-209; Santrock 2006:268). In addition to these, Ehrensaft (1997: 3) introduces what is termed, a common modern parenting style (see section 3.2.5).

There are two main dimensions of parenting styles which emerge consistently from research (Cheng & Furnham 2004:2; Santrock 2006:269). These dimensions are apparent in the parenting styles discussed below (see sections 3.3.1-3.3.5). The first dimension distinguishes between parents who are warm, nurturing, accepting and responsive as opposed to those who are cold, rejecting, indifferent and unresponsive. The second dimension differentiates between those parents who are controlling, demanding, intrusive and discourage independence from those who are undemanding and uncontrolling, allowing and encouraging independence and autonomy. Cheng and Furnham (2004:2) have highlighted the difference between behavioural control and psychological control, defining the latter as constraining, manipulating and invalidating the psychological and emotional expression and experience of children.

3.4.1 Authoritarian parenting style

Parents fitting the authoritarian parenting style are highly controlling; do not encourage children to express disagreement with parental rules or decisions; are autocratic; strict in discipline; and offer little parental love, understanding and support (Baumrind in Mussen et al 1984:386, Carr-Gregg 2005:24; Cowan 2004:93; Emery 2004:209; Santrock 2006:268-269). In autocratic parenting, the responsibility is not handed over to the adolescent, they do not acquire vital life skills such as having the confidence to think and act independently and they are often ill equipped to cope with peer pressure, often succumbing to it (Cowan 2004:93-94). Adolescents who have such parents often become meek and timid or, at the other extreme, fiercely rebellious. The meek ones tend to be well behaved but lacking in confidence and social competence – especially in comparison with children of authoritative parents (Emery 2004:209; Santrock 2006:268). The rebellious ones spend much of their time and energy attempting to outwit their parents by, for example, playing truant and engaging in risky, experimental behaviours, thereby becoming more at risk for juvenile delinquency (Cowan 2004:94).

3.4.2 Permissive/ indulgent parenting style

Parents fitting the permissive/indulgent style of parenting are described as non-controlling; lax in disciplining and rewarding; non-demanding; paying little attention to training children for independence and self-reliance; but warm and loving and very involved in the child's life (Carr-Gregg 2005:24-25; Baumrind in Mussen et al 1984:386; Santrock 2006:268). Cowan (2004:93) points out that this type of parenting is often inconsistent, with the parents allowing something on one day and disallowing it the next, with parents generally allowing almost anything that does not disrupt parents' own plans. Emery (2004:209) refers to such parents as 'indulgent parents' and describes them as being the opposite of authoritarian, giving much love and little discipline.

Children of such parents tend to be self-confident but impulsive and selfish, not learning to respect the boundaries of others. Another danger of such parenting is that these adolescents are often given much responsibility without the skills to cope effectively, often leaving them with feelings of insecurity (Cowan 2004:94). Without having rules to question, these adolescents are deprived of the opportunity to make responsible decisions which are guided by a set of rules and, 'if anything goes', they do not learn to delay gratification and may often have to learn things 'the hard way' or not at all.

3.4.3 Authoritative parenting style

Parents fitting the authoritative parenting style are described as warm, loving, supporting and encouraging of the adolescents' strivings for independence and autonomy, yet also exercising parental control and expecting mature behaviour from their adolescents (Carr-Gregg 2005:24; Baumrind in Mussen et al 1984:386; Santrock 2006:268). According to Emery (2004:209), authoritative parenting involves being both loving and firm with discipline and establishing clear boundaries of parental love and authority. Children of authoritative parents tend to be independent, responsible and self-confident. Adolescents in such families are treated with respect, their input is valued, they are given boundaries, accept responsibility, are given the best opportunity to become

confident and to make responsible decisions, and enter adulthood with a firm sense of who they are and where they are going (Cowan 2004:94-95).

3.4.4 Neglectful parenting style

Neglectful parents are uninvolved in their children's lives, showing little interest in their activities, offering little affection and little discipline (Emery 2004:209; Santrock 2006:268). Children of such parents develop a sense that they are a low priority in their parents' lives. These children tend to be socially incompetent, often tend to exhibit poor self-control and seem to handle independence badly. In addition to this, they often have low self-esteem, are inclined to be immature and may be alienated from the family. During adolescence, they may show patterns of truancy and juvenile delinquency and may be victims of child abuse.

3.4.5 A 'modern' parenting style

The 'modern' style, described by Ehrensaft (1997:3) involves parents who are overindulgent with their children, giving them too much, spoiling them and giving them friendship instead of guidance. Such parents "are characterized as hovering caregivers who fawn over, cater to, and dote on their children in a manner hitherto fore never seen" and who treat their children "like princes and princesses and prime them for success even before they exit the birth canal".

Ehrensaft (1997:3-4) believes that there is a paradox involved in 'modern' parents. On the one hand they can be accused of being self-indulgent and self-centred concentrating on the fulfillment of their own dreams, but on the other hand they can also be accused of being the most child-centred and overly indulgent parents that ever existed. Such parents, Ehrensaft (1997:7) believes, are confused and, in the absence of clear guidelines, often see-saw from one approach to another – "permissive to authoritative, democratic to autocratic, indulgent to withholding".

Smalley and Smalley (2003:11-12) warn that regardless of parenting style, parenting adolescents remains challenging. Parents who struggle with low self-esteem or have enjoyed good, close relationships with their children, may feel hurt when they discover that their adolescents prefer outside input and friendships. Parents who have been very authoritarian or controlling may find that exerting control at this stage usually leads to even more conflict with their adolescents, as they struggle harder for independence.

3.5 PARENTAL CHARACTERISTICS INFLUENCING PARENTING

3.5.1 The midlife phase of parents

Parents of adolescents are often, but not always, in their midlife phase as their children undergo adolescence (Gerdes 1998:146-147; Smalley & Smalley 2003:8-11). Midlife is the transition from early to middle adulthood (usually occurring between the late thirties and early forties) and, like adolescence, is a transitional phase involving many changes. Some midlife changes include:

- a reappraisal of oneself (including taking a new, critical look at oneself, one's achievements, future prospects and current standings);
- a sense of urgency (with a realisation of the fact that time is passing and that time is not unlimited);
- role changes (which could include changes in work and family roles);
- relationship changes (which could include overcoming boredom in marriage, having more time for each other as children become more independent or coping with divorce);
- physical changes (which may include age induced changes such as wrinkles, hair loss or drops in strength and stamina); and
- psychological changes (which may be brought about by a broader perspective of life, which could be positive or negative and have an influence on relationships).

Parents and adolescents thus face some common life-stage issues at the same time (Smith 2003:34-35).

- Physically, adolescents discover that they are developing, changing and becoming bigger, stronger and faster, while conversely, parents discover that they appear to be aging and becoming weaker, heavier and slower.
- Emotionally, adolescents discover that they have a wide range of emotions which can change abruptly causing abrupt mood swings. Parents also are often faced with emotional issues such as fear, anxiety, rejection, insecurity and performance problems.
- Sexually, adolescents are inquisitive and excited about their sexuality and prospective new experiences. Parents may be concerned about a possible waning in their sexual attractiveness and/or performance.
- Adolescents may be excited by the future and even overwhelmed by the amount and variety of choices. Parents, on the other hand, may be worried about the future and the rapid decline in their choices and opportunities.

Parents who are experiencing a 'midlife crisis' of some kind, may be consumed with worries about their own life direction and may be feeling that they have failed as a result of missed opportunities (Sharry 2002:116; Smith 2003:34-35). When their adolescent children appear to have endless opportunities and seem reluctant to utilise them, parents may feel upset and even envious. Research (Gerdes 1998:150; Smith 2003:34-35) has shown that right at the time when parents need to be understanding and supportive of their adolescent children as they undergo the drastic changes of adolescence (see Chapter 2), parents are often faced with many adolescent-like issues of their own.

3.5.2 Parental life stage and associated life tasks

According to Erikson's psycho-social theory (1963:273) discussed previously (see section 2.5.2.1), parents of adolescence fall into the seventh developmental stage called generativity versus stagnation (which comprises the period between the ages of 25 and 65). The major life task of this stage, namely generativity, refers mainly to the task of establishing and guiding the next generation, of transmitting something positive to the next generation, helping them to develop useful lives (Hook 2002:287; Santrock 2004:71; Santrock 2006:44). Accepting that not all individuals have their own children, this

generativity refers to productivity and creativity, although Erikson (1963:273) believes that neither of these are an adequate replacement for guidance of one's own offspring. In broad terms, generativity, includes attaining one or more of the following characteristics (Erikson, in Gerdes et al 1988:66):

- having a healthy relationship with someone of the opposite sex (which includes being interested in having and raising children in accordance with one's cultural values);
- being an active member of society, producing or generating in some way; and
- transmitting possessions, knowledge, skills and values to others, especially to the next generation.

It would seem apparent, therefore, that effective parenting would go a long way to helping people achieve a sense of 'generativity', or a sense of playing a role in helping the younger generation in developing and leading useful lives (Santrock 2006:44). Craig (1996:60) states that "parents sometimes find themselves by helping their children". Adults in this life stage have often resolved their own conflicts from previous life stages and can now turn their attention to assisting others, particularly their own children. The virtue which develops from successful accomplishment of this life stage is that of caring (Hook 2002:287). This life stage also may give rise to a sense of community, which Erikson (1963:267) describes as a "belief in the species" and which includes a willingness to direct one's energies, without conflict, to the solution of social issues.

The opposite is probably true for those who regard their parenting as being ineffective or unsuccessful. They may experience a sense of 'stagnation', which is a sense of having done nothing to help the next generation (Santrock 2006:44), of being stuck or being unable to move forward successfully through this life phase. According to Erikson (1963:267), failure to provide guidance or input to the next generation (and through this a sense of self-enrichment) can result in a sense of stagnation and self-impoverishment and may result in adults who are preoccupied with themselves and seem to gain their only pleasure through self-indulgence (Hook 2002:287).

3.5.3 Generational effects; on parenting

As Codrington and Grant-Marshall (2004:11-12) explain, people are historically highly influenced by the cultures and norms of the society in which they grow up. Whether growing up in a modern, busy city such as London, a remote village in England, an ancient Chinese village, the vast American Mid-West or a rustic Zulu kraal, people absorb the thinking, values and attitudes of the people amongst whom they live. According to generational theory, people who are similar in age, and have been exposed to the same historical and social experiences and /or pressure, generally speaking, view the world in the same way. Shared experiences and times bond people with their peers or generation; with their attitudes, values and expectations being largely based on what life was like while they were growing up (Codrington & Grant-Marshall 2004:3).

Much has been said and written on the 'generation gap' and its influence on misunderstandings between generations and particularly between parents and their children. The Concise Oxford dictionary (Soanes & Hawker:2005) defines the generation gap as "the difference in attitude between those of different generations, leading to a lack of understanding". Codrington and Grant-Marshall (2004:11-19) explain that before the onset of the twentieth century, there was little use for "a formal generational theory in order to get a handle on the mindsets, perceptions, value systems, attitudes and opinions of the era". This was because time moved slowly and changes could be measured and were often almost imperceptible. Whereas in the past, parents and grandparents could safely imagine that their children and grandchildren would grow up subject to much the same societal norms and restrictions with which they had grown up, this can no longer be expected. Parents have to accept that their children will grow up and behave in ways which are very different from theirs, for example:

- going to schools parents would consider unusual, studying subjects parents have never heard of;
- eating different or 'odd' foods;
- listening to, and making different music;
- embarking on careers that did not even exist when parents were young;

- parenting their children and living in very different kinds of 'families';
- retiring in a manner which does not fit parents' definition of retirement; and
- living in community structures which are so different from those in which parents grew up (Codrington & Grant-Marshall 2004:11).

Codrington and Grant-Marshall (2004:74-76) argue that "in no area of our lives is the generational cycle usually more evident, and arguably more important, than it is in parenting. The way we were parented affects us the rest of our lives and, in turn, determines the manner in which we choose to parent". The era in which people are born and the manner in which they are parented largely influences their values. Parents bring their children up in the style that is fashionable or current at the time. According to generational theory, as put forward by Codrington and Marshall (2004:17-19) five generation groups have been identified. The dating of these groups differs from one country to the next, with America leading the way and some countries lagging by as much as fifteen years. As the world has moved into the twenty-first century, however, the "trends that influence and shape generations have increasingly coalesced". These five groups, as they appear in the South African context, are as follows:

- GIs (those born between 1900 and 1925);
- Silents (those born between 1930 and 1949);
- Boomers (those born between 1950 and 1969);
- Xers (those born between 1970 and 1989); and
- Millennials (those born between 1990 and 2005).

Parents bring their children up in the style that is fashionable or current at the time (Codrington & Marshall 2004:75). For example, Silent generation parents left their babies to cry for long periods, often in a separate room. Boomers, on becoming parents, reacted to this by breastfeeding on demand and allowing their babies to sleep with them in their beds. As can be seen, there appears to be a trend for each generation to go to the opposite extreme in areas, where they believe, their parents failed.

Parenting styles are also highly influenced by the times in which parents live (Codrington & Grant-Marshall 2004:75). For example, parents living through the Depression (as in the

1930's), war (as in the 1940's) or an economic boom (as in 1960's), have different demands placed on them, which have an enormous impact on the way that they parent. Parents of today's adolescents would either fall into the Boomer or Xer group (as discussed above) and we will, therefore take a closer look at the characteristics and parenting styles of these two groups.

3.5.3.1 Boomer parents

Boomers were born in a more carefree era than their parents and often "rebelled against the strict 'Save it, don't waste it', and 'Do what I say without questioning me' approach" of their GI or Silent parents (Codrington & Grant-Marshall 2004:83). The material goods Boomers received did not make up for the hugs and kisses they needed, but that "their war-battered, unemotional, stiff-upper lip parents were incapable of giving".

As young people, the Boomer generation was often rebellious and as they became parents themselves, their materialistic values soon labelled them the 'Me Generation' (Codrington & Grant-Marshall 2004:85-88). They changed the workplace, breaking the rules of their Silent bosses and parents. Large numbers of Boomer women began working and many soon decided not to stay at home once they had children, but rather to stay in the work place, demanding more flexible working hours and on-site child care facilities. Boomer mothers had access to the birth control pill and could have fewer children and decide when to have them. Many decided to start a family later in life. This trend and the fact that they had fewer children, meant that this 'Me Generation' had more time, than any previous generation, to follow their own hearts and 'discover' themselves, seeking to meet their own needs, wants and desires.

Codrington and Grant-Marshall (2004:85-87) describe Boomer parents as busy people who are often juggling many different responsibilities. They are also known as the 'Sandwich Generation' as they are sandwiched between the needs of their aging GI or Silent generation parents (for whom they are, increasingly, needing to provide elder care) and the demands of their own Xer or Millennial children. Boomer parents often become poor parents as they may be torn between the demands of the old and the young and they work harder than any previous generation (with much value being

placed on career success). Besides being absent, the Boomer generation is also the generation with the highest divorce rate. Boomers have shifted much of their responsibility onto schools. They often expect schools to take on the responsibility of disciplining their children, yet when discipline is imposed by the school, they often become upset and complain about teachers' actions.

Even when Boomer parents do not work, they seem to have a more 'hands off' approach, in opposition to their overly strict, conservative, protective parents. To avoid being as controlling and dominating as their own parents, they become more permissive, providing too few boundaries or limits for their children. They may fear that if they insist that their children eat certain foods or do their homework at a stipulated time, they may 'repress their personalities'.

3.5.3.2 Xer parents

According to Codrington and Grant-Marshall (2004:87), in South Africa Xers are old enough to remember apartheid but too young to have been involved in any struggle, to uphold it or fight against it. They have still, however, all grown up in the shadow of apartheid, with history viewing Xers as "having been culpable and part of the problem, even though this may not necessarily be the case".

When Xers were young, they were generally brought up in a *laissez faire* style, with child care experts advising parents to put their own needs before those of their children (Codrington and Grant-Marshall 2004:87-93). 'Detachment parenting' celebrated the mutual independence of parent and child. Many Xers have painful memories of their parents' failure to attend prize giving ceremonies, sporting events or important school functions. Their parents often attempted to make up for their absence by giving their children toys, clothes, electronic equipment or other material goods. Xers were seldom in conflict with their parents because they gave them whatever they wanted. Even as adults, Xers are quick to go back to their parents when they run short of money, need washing done or have other needs which their parents can meet. As a result of the way they were parented, Xers may have poor skills in the following:

- anger management;
- negotiation;
- conflict management; and
- personal financial management.

Xers were the first generation to be brought up with television. Xer children often grew up with little input from their parents, who were focused on fulfilling their own dreams (see section 3.4.3.1), and a general public that appeared “indifferent, on the whole, to the dangers posed to a divorce-battered, crime-exposed, sexually transmitted, disease-affected generation” (Codrington & Grant-Marshall 2004:90). Xers are not easily labelled as they are such a diverse generation, with the ‘X’ standing for a generation which marketers have been unable to define.

Codrington and Grant-Marshall (2004:90) describe Xers as a ‘worrying generation’ who are concerned about getting and keeping work; who worry about sex (which is expected, confusing and dangerous as a result of the threat of AIDS); and are cynical about love and marriage (which is not surprising given their parents’ high divorce rate). Many Xers have chosen to have children without marriage. They have also begun a new kind of marriage or committed partnership, where couples no longer both concentrate full time on their careers (as is common for their Boomer parents), but rather, where one spouse or partner will work or study full time while the other works part-time or puts work and study aside for a period of time. Xers share parenting roles with their partners more equitably than any previous generation.

Xers are not inclined to take advice from their parents and are the first generation to have not “gone running back to mother” at some stage in their child’s first year of life. They seem to prefer parent support groups and most Xers have gone on at least one parenting course (Codrington & Grant-Marshall 2004:92). Xers have fought for paternity leave; extended maternity leave; more flexible work hours (to, for example, enable them to fetch children from school or attend sporting events or take their children to the doctor); shopping centres with nappy changing facilities; and work places with day care facilities and breastfeeding rooms.

Xers take their child rearing very seriously and, instead of the 'detachment' parenting practiced by Boomer parents, they have adopted an 'attachment' style which means "babies in your bed as well as on board" (Codrington & Grant-Marshall 2004:96). This means that parents are very involved in their children's lives; allowing children to accompany them to work, restaurants, on trips, and the like. Millennial children are "adored, cosseted and desired long before they are even born". Music is played to them in the womb, stories are read to them and many have constant maternal attention as the 'stay-at-home mom' has become a new status symbol.

Xers are accustomed to constant change and if they apply this to their relationships with their children, it should enable them to make the necessary adjustments when their children reach the adolescent phase. One shortcoming of Xer parents may be that of over-protecting their children (Codrington and Grant-Marshall 2004:92). This over-protection and the tendency for Xer parents to place such high priority on their children's needs and wants, may make it difficult for their Millennial children to consider the needs of others or delay gratification (that is, to be able to cope with not instantly receiving whatever it is that they want or need). Xer parents may need to "let go, and allow their precious Millennial babies to grow up, bump their heads and find out about life for themselves".

The stark contrast between the childhoods of Xers and Millennials is evidence of the generational cycle coming full circle, which is what generational theory is all about (Codrington & Grant-Marshall 2004:93). Smith (2003:14-18), who has worked with adolescents for three decades, describes Millennial adolescents as being "an extreme, intense and diverse group". While some seem optimistic and conservative, there are those who appear to be morose and out of control. In general, they appear to mirror values from the 1950's, more like those of the GI generation (see definition under Section 3.4.1) of their grandparents. In response to terrorist attacks, such as those on the World Trade Center and Pentagon, Millennials (in the US) responded with patriotism and a zeal for justice, which resembles the responses of their grandparents during World War II. Millennials seem to value well-paying occupations, respect from others, and good relationships with their parents (Smith 2003:13). Howe and Strauss (1997:293) predicted

that Millennials “will enter their teens looking and behaving better than any in decades.... This generation will build a reputation for meeting and beating adult expectations”.

In the USA, these predictions seem to have proven to be accurate (Smith 2003:16). Music and clothing trends seem to be brighter and happier, peer pressure has often proven to be a positive force, adolescent crime has decreased, romance (rather than casual sex) has returned to relationships, there has been a decrease in teenage pregnancies and abortions, and a trend towards marrying at an earlier age. This drastic change in the Millennial generation compared with the “slacker, can’t-get-out-of-bed Xers, the selfish, status-symbol-obsessed Boomers and the cautious, Silent generation” is a result of the “generational story, the era in which they are being born, plus the parenting they are receiving and the attitude of society towards them” (Codrington & Grant-Marshall 2004:93).

Smith (2003:16) warns that Millennials face more serious problems than their parents did during adolescence. Difficulties Millennials face include: the breakdown of the family, long term effects of divorce, HIV/AIDS, violence, crime, and the growing divide between the lower class and the rising middle class.

3.5.4 Cultural and economic factors affecting parenting

Thus far in this section, it has been shown that parents’ of adolescents may share common ground such as being in the same life phase (that is, mid-life), having similar life tasks (for example being productive or generative) and sharing similar life experiences relating to when they were born (that is, generational effects). Parents of adolescents, however, may differ widely in many other respects and these differences can have profound effects on their parenting. For example, parenting can be influenced by factors such as culture, ethnicity and socio-economic status (Santrock 2006:277-279).

3.5.4.1 Cultural effects on parenting

Cultures vary in a number of issues involving families and parenting. According to Harkness and Super (2002:212), these issues include:

- parental customs and practices (for example, sleeping arrangements for infants and young children);
- parental beliefs and values;
- parental behaviour (for example disciplining of children);
- the role of the father and mother in the family; and
- the extent to which support systems are available to parents (for example, the extent to which grand-parents or the extended family can be relied upon).

Sanrock (2006:277-278) reports that while there are cross-cultural differences in parenting, a study done by Rohner and Rohner in 186 cultures showed that the most common pattern of parenting was a “warm, controlling style” that is neither too permissive nor too restrictive. The researchers commented that the majority of cultures around the world seem to have discovered, over many centuries, the ‘truth’ that children’s development is promoted most effectively by love and a measure of parental control.

3.5.4.2 The effects of ethnicity on parenting

Families within different ethnic groups in the United States differ in size, composition, structure, family support systems, and levels of income and education (Coll & Pachter 2002). Similarly, in South Africa, families from different ethnic groups differ in many of the same ways.

3.5.4.3 The effects of socio-economic status on parenting

According to Hoff, Laursen and Tardiff (2002:246), differences have been found in child rearing practices among different socio-economic status (SES) groups in America and most Western cultures. Lower-SES parents:

- place high value on their children conforming to the expectations of society;
- create a home atmosphere in which it is clear that parents have authority over children;
- use physical punishment frequently in disciplining their children; and
- are more directive and less conversational in their communication with their children.

On the other hand, higher-SES parents:

- place high value on developing their children's initiative and teaching them to delay gratification;
- create an atmosphere in which children and parents are seen as more equal partners and where rules are discussed rather than imposed in an authoritarian manner;
- are less likely to use physical punishment in disciplining their children; and
- are less directive and more conversational in their communication with their children.

Parents' socio-economic status also affects the way they view education (Hoff et al 2002:246). Whereas middle- and upper-income parents believe that both parents and teachers should encourage children to achieve at school, lower-income parents commonly view education as "the teacher's job".

3.6 CHALLENGES COMMON TO PARENTS OF ADOLESCENTS

Research (Black 1996:13-17; Carr-Gregg 2005:1; Shefer 2004:80) has shown that adolescence has received much 'bad publicity', that many parents fear parenting adolescents and that parenting during this life stage (although sometimes challenging) is

not necessarily a negative experience fraught with difficulties. Parents often feel helpless in the face of expected or actual changes in their adolescent children. Black (1996:36-45) explains that if parents believe that all adolescents are difficult, they may be too fearful and pessimistic to take on their parental role, may see their child as the enemy and may leave the vital parental tasks of adolescence to youth group leaders, other adults or even peers of the child.

Parenting adolescents is very different to parenting at any other age because of the dramatic changes accompanying the adolescent life phase (Townsend 2006:10-11). Parents thus face many different challenges in their efforts to parent their adolescents effectively. We now take a closer look at some of the common challenges which such parents may encounter.

3.6.1 Parent-adolescent conflict

The literature (Black 1996:37-38; Santrock 2006:405-407; Sharry 2002:115-116; Smalley & Smalley 2003: ix-xv; Townsend 2006:9-11) leaves no doubt that the parent-child relationship undergoes a major transition period during adolescence. While attachment to parents remains strong during adolescence, connectedness is not always smooth and conflict with parents often escalates. This increase in conflict may be caused by a number of factors, namely:

- the physical changes of puberty;
- cognitive changes involving increased reasoning ability and idealism;
- psycho-social changes focusing on increased independence and identity formation;
- maturational changes in parents; and
- expectations that are violated by adolescents and parents.

Children begin to become more independent and the parent's opportunity for "establishing and affirming" certain values in their children's lives is coming to an end (Black 1996:37-38). Many parents observe their adolescent changing from a compliant child to someone who is "non-compliant, oppositional and resistant to parental standards" (Santrock 2006:405). As Sharry (2002:115-116) explains, the happy child who is

open and communicative can suddenly turn into a distant, argumentative, secretive individual, making parents feel rejected or excluded. In addition to this, there are increased pressures for adolescents to become involved in drugs, alcohol, sexual activity or other risky exploits, causing parents to become concerned about the safety and well-being of their offspring.

Parents often respond by clamping down and putting more pressure on the adolescent to conform to parental standards. Parents often also expect their adolescents to mature instantaneously, instead of understanding that the journey can take 10 to 15 years. Those parents who recognise that this transition takes time are more likely to handle their youth more competently. They can avoid two main parenting traps, namely that of panicking and clamping down too severely and, the opposite tactic, of letting adolescents do as they please without adult supervision. Sharry (2002:118) points out that clamping down severely can cause adolescents to rebel or resort to doing things secretly. On the other hand, leaving adolescents unsupervised may make them feel neglected and unloved and may cause them to become involved in dangerous situations and activities. Both these approaches “rob teenagers of having involved parents who can support them through the difficulties they face”.

According to Cowan (2004:2) three factors which most influence parenting adolescent children are that:

- parents tend to forget how they behaved when they were adolescents and also their own turbulent emotions during these years;
- when parents do remember their own rebellious or troublesome behaviour, they tend to do everything in their power to protect their own adolescent children from experiencing similar things; and
- parents mostly remember how their parents controlled their behaviour and they attempt to emulate their parents' disciplinary style, even although they themselves rebelled against it at the time.

Santrock (2006:406) compares what he refers to as the old and new models of parent-adolescent relationships. The old model suggests that as the adolescents mature, they

detach from parents, become autonomous and enter a world which is apart from that of their parents. The old model also suggests that this process is accompanied by intense parent-adolescent conflict. The new model views parents as important attachment and support figures as the adolescent enters a wider, more complex social world. The new model also regards parent-adolescent conflict as being moderate and views this conflict as normal and as serving an important role in helping the adolescent move from the dependence of childhood to the independence of adulthood.

Santrock (2006:406) concedes that about one in five American families experience highly stressful, intense and/or prolonged adolescent-parent conflict. This conflict is often associated with adolescent problems such as leaving home prematurely, juvenile delinquency, dropping out of school, pregnancy, early marriage, membership of religious cults and drug abuse. Parent-adolescent conflict also varies from one culture to another. Many of the more specific 'normal' challenges discussed below add to, or arise in part, from parent-adolescent conflict. Parents define 'normal' as that which is acceptable to themselves and their friends and adolescents regard 'normal' as what is acceptable to them and their friends (Cowan 2004:9).

3.6.2 Mood swings

A mood, which can be described as a pervasive emotional state of mind, can be positive or negative and, for most people, moods come and go without interfering too much with life (Townsend 2006:231). Healthy adults are able to control moods and not allow circumstances and environment to determine their moods. Adolescents, however, are highly influenced by their surroundings, with good events often causing euphoric moods and bad events bringing on despair. According to Cowan (2004:11-17), mood swings are one of the most common and challenging of adolescent behaviours for parents. "No-one can be quite as mean and horrid as a teenager in a bad mood". Most often, this leaves parents feeling even more hurt than angry. Adolescents are often kind and "sickly sweet" to people outside of the family, while they may shout at, ignore or be rude to family members, especially parents.

As discussed in Chapter Two (see section 2.2.2.5), adolescent girls are inclined to experience more intense moods than adolescent boys. Accordingly, Carr-Gregg (2005:48-49) states that many parents of adolescents agree that girls are “higher maintenance” than boys, with girls being perceived as “more multi-faceted, more complex emotionally, more manipulative and infinitely more moody than boys”. The situation is compounded by the fact that girls are generally more verbal and therefore more likely to express emotions and argue (especially with their parents) than boys.

These changes catch parents off guard because adolescence comes after a life stage which is relatively easy for parents. Children (of 6 to 12 years of age) are usually easier to manage than babies and toddlers, have a sense of what is right and wrong, seldom challenge parental rule, often hate it when parents are angry with them, find it difficult to sulk for long periods (wanting to get on and play), are anxious to please parents and often look up to parents as heroes (Cowan 2004:13-17). Adolescent rebellion is all the more difficult to cope with as it comes after this “hero-worship phase”. Parents have to cope with being “fallen heroes” and “punch bags”. Adolescents are plagued by many confusing feelings, their hormones affect their mood, and because they feel safe with parents, they seem inclined to take out their frustrations on parents. Townsend (2006:232-233) notes that adolescents are more inclined to express negative moods at home because home is a place where they can ‘be themselves’ and express the “more primitive and immature parts” of themselves and hopefully develop the abilities needed to stabilise and control their moods.

3.6.3 Risk-taking behaviour and experimentation

Adolescence is a transitional phase that involves much experimentation and risk-taking (Carr-Gregg 2005:102; Santrock 2006:381-382; Shefer 2004:80-82). Dahl (2004:6) explains that adolescents generally like “intensity, excitement, and arousal” and describes adolescence as a “developmental period when an appetite for adventure, a predilection for risks, and a desire for novelty and thrills seem to reach naturally high levels”. While this is the case to some degree for most adolescents, it is important to remember that there is a wide range of individual differences during this developmental period. When

adolescents find themselves in tempting and dangerous situations with little adult supervision, their natural inclination to engage in risk-taking behaviours, combined with their immaturity and lack of self-regulatory skills, can make them vulnerable to many negative outcomes (Santrock 2006:382). The egocentricity of their thinking, which includes their sense of invincibility and uniqueness (see section 2.3.3.3), may contribute to this risk taking behaviour as it makes them believe things such as “I won’t become pregnant” and “No-one understands me, particularly my parents”. Some common risk-taking behaviours will now be discussed.

3.6.3.1 Risky sexual behaviour

Risky sexual behaviour is one of the key challenges, especially in the context of the current HIV/AIDS pandemic and other consequences such as STI’s (sexually transmitted infections), unplanned pregnancies and emotional hurts (Carr-Gregg 2005:102-107; Shefer 2004:80; Townsend (2006:259). According to LoveLife (2002), a project which addresses HIV/AIDS and life skills education for adolescents and young adults, HIV mainly affects young South Africans, with 60% of all adults who acquire HIV becoming HIV positive before the age of 25 (Shefer 2004:79). Annual surveys of national representative samples of South African adolescents reveal that the proportion of adolescents who had penetrative sex increased exponentially between the ages of 12 and 17 (Shefer 2004:79-80). Among sexually active 12 to 17 year olds, 51 % reported their first penetrative sex at 14 or earlier, with many such young people also reporting a high number of sexual partners. It is thus not surprising that the incidence of sexually transmitted infections and unplanned pregnancies is extremely high among adolescents in many South African communities.

Townsend (2006:259) explains that parents of adolescents have to accept the reality that the child, whom they raised from a baby, is now a sexual being, whose body is ready for sex, who thinks about and talks about sex and who may want to have sex. While some parents find this reality easier to accept than others, it is necessary for parents to make this mental shift if they are to help their adolescent cope with adolescent sexuality.

Adolescents tend to hide their sexual activity from their parents and parents only find out about it after problems (such as unwanted pregnancies or sexually transmitted infections) have arisen. Some of the reasons why adolescents engage in sexual activity include that:

- they are biologically ready for sex and their hormones are active;
- many of their peers are sexually active and often culture supports the idea that sexual activity is acceptable and/or expected for adolescents;
- they do not value abstinence and virginity; and
- they have other weaknesses and vulnerabilities (such as alcohol or drug dependencies or emotional insecurities) that make them more susceptible in this area (Townsend 2006:206).

While parents may find the challenges involved in their adolescents' sexuality overwhelming, they should keep in mind how much more overwhelming it can be for the adolescents themselves (Townsend 2006:260). The adolescent has to learn to deal with his/her own newly founded sexuality and is bombarded with emotions, opinions, pressures and life-changing choices in this life area.

3.6.3.2 Substance abuse and dependencies

Experimentation with alcohol, smoking and drugs is very common during adolescence, with adolescents often failing to see the link between their present behaviours and future consequences (Dilley & Clitheroe 2002:39). Townsend (2006:155-156) explains that the adolescent years provide an unfortunate "perfect fit" for substance abuse. Adolescents commonly challenge the authority and values of their parents; highly value peer opinion and approval; are interested in feelings and experiences more than exercising good judgment; can quickly become disconnected and affected by feelings of isolation; and can be easily hurt and discouraged and "gravitate toward quick ways to medicate the pain". In addition to this, drugs have increasingly become more readily available.

While many adolescents use alcohol and other drugs to satisfy curiosity, feel good, reduce stress, feel grown up or to fit in, it is difficult to ascertain which adolescents will

experiment and stop and which will develop serious problems. Some adolescents are more at risk than others when it comes to developing serious alcohol and drug related problems. Dilley and Clitheroe (2002:39-40) state that those at high risk include those:

- with a family history of substance abuse;
- who are depressed;
- who have low self-esteem;
- who feel they don't fit in; and/or
- who feel unloved or misunderstood.

Alcohol and drug abuse has been recognised as a major problem among South African adolescents (Shefer 2004:80-81). Dilley and Clitheroe (2002:39-40) explain that those adolescents who begin drinking and smoking at a young age are at higher risk of using other drugs later. Adolescents abuse a variety of substances, both legal and illegal. Legally available drugs include alcohol, nicotine (in cigarettes), prescribed medications, inhalants (fumes from glues, aerosols and solvents) and over-the-counter cold, cough, sleep and diet medications. The most common illegal drugs are dagga (also known as marijuana or pot); stimulants such as mandrax, cocaine, crack and speed; LSD, PCP, heroine; and designer drugs such as Ecstasy (Dilley & Clitheroe 2002:39).

Substance abuse is a major parenting fear and/or challenge for parents of adolescents, both because of the susceptibility of adolescents and the dire life consequences of such abuse (Townsend 2006:155-160). Adolescent substance abuse holds many risks for young people and their future. Research (Dilley & Clitheroe 2002:39-40; Shefer 2004:81) has identified a number of difficulties strongly associated with substance abuse, namely:

- academic problems (such as poor attendance and achievement);
- poor judgment (which increases risk for accidents, violence and other harmful actions);
- increased mental health problems;
- suicidal desires and/or actions;
- sexual risk-taking (which increases vulnerability to HIV/AIDS, other STD's and unwanted pregnancies); and
- involvement in violence and crime (as most drug use is illegal).

Drugs interfere with the adolescent's psychological development because at a time when they need to become more independent from their parents and more self-reliant, they instead, become reliant on drugs. Apart from the physical feelings of taking a drug, adolescents may feel empty and inadequate without the support of drugs. Because of the illegal nature of drug abuse, parents need to be aware that their adolescent children are at risk not only by using drugs but also simply by buying them (Dilley & Clitheroe 2002:40). An added concern is that the lure of easy money and popularity often attracts adolescents into drug dealing.

Townsend (2006:160, 223-224) stresses that alcohol and drugs are not the only things on which adolescents can become dependent. Some adolescents, for example, become addicted to viewing pornographic websites and can suffer intense feelings of shame, guilt and helplessness as they compulsively keep seeking out sexual images. The Internet can be very useful to adolescents, providing them with access to research, news and other helpful information but it can also bring problems of which parents need to be aware. When it comes to the Internet, parents have the challenge of protecting their adolescents from harmful content, harmful people and harmful over-involvement. Adolescents can be exposed to images and text which can be particularly damaging to the vulnerable adolescent. They can form unhealthy relationships with those they meet online and can be approached by those who may have a negative influence on them. Even if the information and contacts are harmless, adolescents can become over-involved, spending too much time on the computer and not attending to homework and other responsibilities. They also run the risk of "living in cyberworld and disconnecting from real-life relationships, activities, and experiences".

Some adolescents develop food dependencies or eating disorders such as anorexia, bulimia and obesity (Townsend 2006:160). Food intake and eating habits become their obsessive life focus, sometimes even to the point of being life-threatening. Eating disorders will be discussed in more detail later (see section 3.6.8.5).

3.6.3.3 Impulsive behaviour

Impulsivity appears to be a common characteristic of adolescence and signals that the adolescent “has emotions ... wants to experience life, take risks and be present” (Townsend 2006:218). Adolescents who don't have impulses may struggle with detachment or depression. If impulsive behaviour happens sporadically and is not of a serious nature, it can be regarded as normal for this life stage. Impulsive behaviours range from frivolous, silly actions to dangerous ones and include things like:

- going out after curfew;
- practical jokes;
- taking a parent's car out without permission;
- burning hair on arms; or
- doing graffiti on a public building or the neighbourhood walls.

Adolescents' risky driving habits, such as speeding, tailgating and driving under the influence of alcohol or other drugs often leads to accidents (Santröck 2006:382). More than 50 percent of deaths in individuals between the ages of 10 and 19 are due to accidents, and most of those involve motor vehicles, especially for older adolescents.

3.6.3.4 Involvement in violence and criminal activities

Adolescent aggression has become a significant problem (Townsend 2006:149-154). Violence in the form of fighting and bullying is common in schools, public areas, neighbourhoods and sporting venues. Aggressive behaviour can range from yelling or throwing objects to extremely dangerous and severe acts of violence such as gang violence or the Columbine tragedy in America. The problem is understandable when considering that adolescents' bodies are almost as strong (if not stronger) than adults; that raging emotions are often difficult to control; that adolescents often have a drive to push against all limits; and that there appears to be a cultural and peer acceptance of violence.

According to Shefer (2004:81), South Africans have long been exposed to a violent society. South Africans are still recovering from the violence of apartheid and violence continues to be “enmeshed in the fabric of our society, especially as the divisions of wealth and poverty continue to exist and indeed deepen”. One area which seems to draw young people into violence, both internationally and in South Africa, is the area of gang cultures. While it is argued, that gangs can provide adolescents with a life structure and fulfill needs such as the need for protection, belonging and status, gangs often also provide the avenue through which adolescents become involved in violent acts and criminal activities such as sexual assault, rape, vandalism, robbery, and murder.

Parents need to remember that many of the risky and impulsive behaviours discussed above can become violent or criminal in nature. For example, a dare from a friend could lead an adolescent to shop-lift, steal the family car, or abuse alcohol or drugs, which could result in him/her to being arrested, becoming violent or engaging in further criminal activities.

The label juvenile delinquent is given to an adolescent who breaks the law or who engages in behaviour that is considered illegal (Santrock 2006:420). Causes which have been proposed for juvenile delinquency include: heredity, identity problems, community influences and family experiences. Adolescents whose development has prevented them from adopting acceptable social roles or made them feel that they are unable to meet the expectations placed on them may choose a negative identity. Adolescents with a negative identity may obtain support for this negative image among peers, which then serves to reinforce this negative identity.

Santrock (2006:420-421) argues that although delinquency is less exclusively a phenomenon of lower socio-economic groups than it was in the past, some characteristics of lower socio-economic culture might promote delinquency. The norms of many lower socio-economic peer groups and gangs are anti-social or counter productive to the goals and norms of the society at large. It may be quite difficult for adolescents from low income neighbourhoods to stay out of trouble. Adolescents living in areas with a high crime rate may observe many models who engage in criminal activities. Those from low income backgrounds may even gain attention and/or status by engaging in anti-social

behaviour. For boys of lower socio-economic status, being 'tough and masculine' are high status traits which are often measured by adolescents' success at performing and getting away with delinquent actions. Other characteristics of such communities, which could foster delinquency, include:

- poverty;
- unemployment;
- feelings of alienation towards people from higher socio-economic groups;
- lack of educational funding and good schooling; and
- lack of organised neighbourhood activities.

Family support systems also play a role in determining whether or not adolescents are likely to engage in delinquent behaviour (Coley, Morris & Hernandez 2004:948-965). Effective parental monitoring of adolescents can help to prevent delinquent behaviour. Bor, McGee and Fagan (2004:365-372) found that family discord and inconsistent and inappropriate discipline are associated with delinquency. Having delinquent siblings or peers can also greatly increase the risk of an adolescent become delinquent (Santrock 2004:421).

3.6.4 Peer pressure

Cowan (2004:46) defines peer pressure as the "pressure exerted by a child's friends to behave in a manner that is similar or acceptable to them". Parents often think of peer pressure as the pressure exerted by other adolescents to influence their adolescent to drink, smoke, take drugs, play truant or a large variety of other negative behaviours. Peer pressure should not be underestimated and parents often hope that their adolescent will mix with 'the right sort of people' and parents often panic when their adolescent children start mixing with others who have different values.

Adolescents are vulnerable and in danger of being led astray, especially in their search for their own identity. They have a need to feel that they belong as they separate from their parents and this need to belong may spur them on to do things that will gain them entry into a group and help them to maintain acceptance by a group. Parents should be

aware that adolescents who have few friends may be even more susceptible to peer pressure (Schwartz & Cappello 2000:139-140) as they may feel compelled to do things to ensure that they are not left “alone in the world”.

Although peer pressure usually has a negative connotation, this is not always the case (Santrock 2006:409). Adolescents do engage in many different types of negative conformity behaviour, such as using bad language, stealing, vandalising and making fun of parents and teachers. Similarly, some risk areas for adolescents (such as pregnancy, substance abuse and violence) are clearly areas where peer pressure plays a major role. Much peer pressure, however, simply involves a desire to be involved in the peer world by, for example, dressing like friends and wanting to spend much time with certain groups or cliques. Peer groups may even inspire adolescents to engage in pro-social behaviours (Santrock 2006:409; Shefer 2004:80). Some examples of such groups would be clubs that raise money for a worthy cause, groups that become involved in working with under-privileged children, and groups which publicly and proudly announce their decision to remain sexually abstinent until marriage.

3.6.5 Communication difficulties

3.6.5.1 Argumentativeness

Adolescents are known to be argumentative, having the verbal ability of adults and the energy to “push an issue to infinite lengths” (Townsend 2006:161). Adolescents frequently argue in order to evoke a reaction from parents or, more often, to resist limits imposed by parents. They will be able to provide many reasons why parents are wrong about a curfew, behaviour problem or school problem. Sometimes their reasons contradict each other and their egocentricity (see section 2.3.3.3) may prevent them from seeing their parent’s point of view, may cause them to believe that no-one understands them and that they are invincible (with it, for example, being impossible for them to become pregnant or contract HIV/AIDS).

3.6.5.2 Disrespectfulness

Parents often find it challenging and hurtful when adolescents communicate in a disrespectful manner (Townsend 2006:199-201). Girls' verbal outbursts and accompanying non-verbal cues can be most disconcerting to parents, especially mothers. Hersh (2004:83) illustrates this with the following quote by Rachel Simmons: "Girls fight with body language and relationships instead of fists and knives. There is no gesture more devastating than the back turning away". In a society that encourages us to raise loving girls, it can be disconcerting for parents to acknowledge that our adolescent daughters are often hateful and mean. It can be shocking to parents to experience the cold stare, raised eyebrows and harsh words of their children, especially their daughters. Cowan (2004:26) explains that the sarcasm, body language, face pulling, and 'rolling of the eyes' can make parents angry and can be very hurtful to parents, with mothers usually taking the brunt of it.

3.6.5.3 Lack of communication

Many adolescents, especially boys may be uncommunicative and reluctant to share their thoughts and feelings with parents (Smalley & Smalley 2003:3-5). Parents often feel hurt that their child no longer confides in them. The adolescent may even feel hurt by the distance which this creates, even although he/she is the one who insists on it. This results in much parent-adolescent conflict.

In my practice, I have found that many adolescents are reluctant to speak to their parents as they feel that their parents do not listen or 'hear them out'. Before adolescents have had an opportunity to finish sharing thoughts, feelings or an account of events, parents interrupt and give them advice, judge, scold, console, instruct or communicate in a manner which does not foster communication. It is not unusual for children to "pull down the shades" on their parents, refusing to share their thoughts and feelings with them (Gordon 2000:36-37). Children often learn that talking to their parents is unhelpful or unsafe. Adolescents, especially, can be very hurt by parents who do not maintain confidentiality and share, what their children have told them, with others. Gordon

(2000:37) warns that poor communication on the part of parents is the reason that many parents miss out on the opportunity to help their children with problems they encounter in life.

3.6.5.4 Defiance

Adolescents are also known to be defiant. Townsend (2006:191-192) warns that that, while they appear similar, argumentativeness and defiance are not the same, and it is important for parents to discern the difference. An argumentative adolescent still accepts, at some level, the role of the parent, while desperately attempting to change the parent's mind. A defiant adolescent, however, questions or completely rejects the authority of the parent. Argumentativeness can escalate into defiance. This defiance flares up suddenly, is emotional in nature and often results in the adolescent impulsively making rash statements, which he/she does not necessarily mean. The adolescent may, for example, in a moment of frustration shout, "I'm going to get a tattoo, no matter what you say!" The adolescent then may feel compelled to be defiant, and prove he/she meant these rash words in order to save face with parents. This is not true defiance.

True defiance, according to Townsend (2006:192), is not impulsive in nature. Defiant adolescents reject parental authority, want to control their own lives and "prematurely fire their parents as their guardians and managers". They routinely confront their parents with words such as, "You can't tell me what to do".

3.6.5.5 Deception and lying

When an adolescent deceives and/or lies to his/her parents, it can be dangerous as it means that the adolescent is 'hiding from', and, is not well known to, his/her parents (Townsend 2006:187-189). Three common reasons for adolescent deception are:

- fear (for example, when an adolescent is afraid of being honest, fearful that honesty might cause parents to be disappointed, angry or to withdraw their love);
- when parents put the adolescent in a no-win (or double bind) situation in which the adolescent is almost forced to lie (for example, when a parent makes an

unrealistic rule like saying he/she is not to relate to one member of his friendship group); and

- a “short cut mentality” (when adolescents lie because it seems the easiest and most practical thing to do at the time).

3.6.6 Dating and romantic relationships

As Santrock (2006:410) points out, most adolescents spend a large amount of time dating or thinking about dating. This can be a new and challenging experience for parents but they should keep in mind that dating can perform a number of important functions. Dating no longer simply fulfills its original courtship function. Dating has become a form of recreation; a source of status and achievement; and a setting in which the adolescent is able to learn about close relationships. One important function of dating continues to be that of mate selection. Parents may find it particularly challenging if their adolescent children begin dating early. Research has shown that these parents may have reason for concern as early dating has been found to be associated with problems at home and school and with adolescent pregnancy (Santrock 2006:410-411).

When adolescents begin dating, their early romantic relationships allow them to explore how attractive they are, how they should romantically interact with someone, and how this is viewed by the peer group. Later, once adolescents have acquired some basic competencies in interacting romantically, the fulfillment of attachment and sexual needs become more important in these relationships (Bouchey & Furman 2003:316-317).

Adolescents, in their early exploration of romantic relationships, often take comfort in numbers and like to meet in mixed sex groups. Parents could encourage this as it seems to be a healthy way for adolescents to learn to interact with members of the opposite sex in a non-threatening environment. It may also prevent them from seeking intimate romantic involvement at too early an age. The socio-cultural context has a powerful influence on adolescent's dating patterns (Santrock 2006:412). Values and religious beliefs of people in various cultures often have an influence on when dating begins; how much

freedom is allowed in dating; whether dates are chaperoned; and the male and female roles when dating. Parents are able to provide healthy boundaries for dating and to provide support, encouragement and comfort when relationships flounder, end, become abusive or have a negative influence on their children.

Cyberdating (i.e., dating over the Internet) is a newly introduced form of dating. According to Santrock (2006:411), cyberdating is most popular in the middle school years. Parents need to caution adolescents about the potential dangers involved in cyberdating as this type of dating means not really knowing who is on the other end of the computer connection.

Most research on romantic relationships during adolescence has focused on heterosexual relationships. Recently researchers have begun to study romantic relationships in homosexual youth (Diamond & Savin-Williams 2003:393-407). This research has shown that while many homosexual adolescents have same-sex sexual experience with peers who are 'experimenting' before going on to primarily hetero-sexual relationships, relatively few have same-sex romantic relationships because of limited opportunities and the social disapproval that such relationships may generate from families or heterosexual peers. Some of these youths date other-sex peers in order to clarify their sexual orientation or disguise it from others. The break-up of a romantic homosexual relationship is judged as very stressful, second only to the disclosure of sexual orientation to parents.

Carr-Gregg (2005:114) and Shefer (2004:7) have shown that homosexual adolescents are at much greater risk for being bullied, suffering from depression and/or anxiety, feeling suicidal and becoming involved in substance abuse. Homosexual adolescents and parents of such adolescents may need much guidance and support. Parents need to bear in mind that many adolescents question their sexuality from time to time, with it being quite common for adolescents to be attracted to someone of the same sex, with it being "nothing more than a temporary crush which they will outgrow" (Carr-Gregg 2005:113).

3.6.7 Academic or school problems

Adolescents have increased academic demands which, Townsend (2006:143) argues, are much more intense than the academic demands which their parents had when they were adolescents. This increase in academic responsibility comes at a time when the adolescent's internal world is in turmoil. There is also an increased pressure to do well at school and it appears to be ironic that just when many adolescents "stop caring about how well they do in school, their academic achievement matters more than ever". This increase in academic responsibility and pressure may contribute to the problem of academic underachievement among adolescents.

Underachievement does not refer to adolescents who have poor academic results but lack the ability to achieve good results. Underachievement refers to the situation in which a student's performance is significantly below his/her ability (Townsend 2006:144). There can be many reasons for underachievement, for example, learning problems, attention difficulties and emotional issues.

Research (Carr-Gregg 2005:60-64) has shown that academic problems are more prevalent among adolescent boys than adolescent girls. Adolescent girls are inclined to work harder than boys and to obtain better results. Boys tend to read less than girls; are more inclined to suffer with attention problems or learning difficulties; and more likely to be represented in school detentions, suspensions and expulsions.

Carr-Gregg (2005:64-68) highlights bullying as another common adolescent problem and warns that it "shouldn't be dismissed as a harmless schoolyard rite of passage". School bullying "involves the psychological, emotional, social or physical harassment of one student by another, though teachers and parents can also be bullies or targets too" (Carr-Gregg 2005:64). Bullying can have an enormous impact on adolescents, giving their lives a "nightmare quality" and making day-to-day life unbearable (MacFarlane & McPherson 1999:103-109). Parents need to be aware that girls are likely to bully just as much as boys (although their bullying is less often physical bullying). Victims of bullies can suffer short-term and long-term effects (Baldry & Farrington 2004:1-15). Short-term

effects include depression, loss of interest in school work and even school avoidance. The effects of bullying, however, can persist into adulthood. People who were bullied as children and adolescents have been found to be more depressed and to have lower self-esteem than their counterparts who had not been bullied (Santrock 2006:349).

Bullying can also indicate a serious problem for the bully. Research has shown that children and adolescents who are bullies are far more likely, than non-bullies, to commit criminal offenses later in life (MacFarlane & McPherson 1999:110; Santrock 2006:349). Parents whose adolescent children are bullying or being bullied have a difficult challenge in overcoming this issue and may inadvertently even play a role themselves. Research has shown that for both parents and bullies, the parenting they experience is linked with their peer interaction (Santrock 2006:348-349). It has been found that while bullies' parents are inclined to be rejecting, authoritarian or permissive about their child's aggression, victim's parents are inclined to be anxious and overprotective.

3.6.8 Emotional and mental health problems

3.6.8.1 Depression

Adolescents commonly have intense 'highs' (characterised by positive feelings) and 'lows' (characterised by negative feelings) as a result of powerful hormonal changes and because they are coping with things like new relationships, family conflicts and performance pressures (Dilley & Clitheroe 2002:42). It is not uncommon for adolescents to suffer with underlying feelings of depression as they come to terms with all the changes and stresses which adolescence may bring. These underlying feelings are often reflected in adolescents' conversations with comments such as, "Whatever? Who cares? What's the point of living?" According to Kaufmann (2001:2), about three out of every 10 adolescents experience mild to moderate depressive symptoms, which is actually similar to the statistics for adult depression.

Adolescents who experience loss, extreme stress or who suffer with learning, conduct or anxiety disorders are at a higher risk for depression. Some particularly stressful factors for

adolescents include: moving (which could mean leaving friends behind and having to make new ones); failure (which could include academic failure or not being selected for a team or school production); and the loss of a parent, sibling or friend through death or divorce. Depression also tends to run in families. According to Graber (2004:611-613), parental factors can also place adolescents at risk for developing depression. These include: having a depressed parent; emotionally unavailable parents; parents who have high marital conflict; and parents with financial difficulties. Parental divorce increases depressive symptoms in adolescence (Santrock 2004:423).

Peer relations are also associated with adolescent depression (Bearman & Moody 2004: 89-91). Experiencing peer rejection, not having a close relationship with a best friend, and having little contact with friends all increase depressive tendencies in adolescents. Carr-Gregg (2005:48-51) states that there seems to be consensus among parents that adolescent girls are more demanding and challenging than adolescent boys. Irrespective of social class, parents view girls as more complex emotionally and much more moody than boys; and adolescent girls consistently have higher rates of depression than adolescent boys (Hersh 2004:68; Santrock 2004:423). Some reasons for this gender difference include that:

- girls tend to ruminate in their depressed mood;
- girls tend to have more negative self-images (especially body images) than boys;
- females have to cope with more discrimination than males; and
- puberty usually occurs earlier for girls who experience “a piling up of changes and life experiences in the middle school years, which can increase depression” (Santrock 2006:423).

Depression can cause a host of other problems for adolescents and their parents (Dilley & Clitheroe 2002:43). Depressed adolescents may abuse alcohol or other drugs in an attempt to feel better. Girls may become promiscuous to distract themselves from underlying depression and becoming pregnant can be seen as a way to fill the emptiness and overcome the loneliness which depression brings. Adolescents who cause trouble at home or school are often depressed. They themselves are often not aware that they are depressed and, because they may not always seem sad, parents and teachers may not

realise that the problematic behaviour is actually a sign of depression. Suicide (or suicidal thoughts or attempts) and self-mutilation can also result from depression (these are discussed in more detail below – see sections 3.6.6.2 & 3.6.6.3).

Certain factors, such as parental support or being part of a group, can protect adolescents (to a degree) from overwhelming feelings of depression, but there could well be times when feelings of loneliness, panic or depression overcome them. Adolescents who suffer from the illness of depression have symptoms which persist to such extent that they interfere with the adolescent's ability to function. Certain types of behaviour may indicate that adolescents are suffering from depression. It is important to note that when an adolescent's depressed episode is left untreated, the adolescent is more likely to experience more intense depressive episodes in adulthood and a greater understanding of adolescent depression could lead to a decrease in adult depression (Hersh 2004:163).

3.6.8.2 Suicide

According to MacFarlane and McPherson (1999:208-209), there appear to be two main types of suicidal behaviour, namely, the type where adolescents deliberately set out to kill themselves and the type where adolescents deliberately harm themselves without the intention of killing themselves. While most young people who harm themselves fall into one of these two groups, there are those who set out to kill themselves and fail, and those who accidentally kill themselves while not intending to do so. Some reasons adolescents have given for attempting suicide include:

- a wish to die;
- a wish to escape;
- a way to express hostility;
- a way to make someone feel guilty; and
- a way of gaining attention.

Suicide is the third leading cause of death amongst adolescents in the United States of America (National Centre for Health Statistics, 2004). The incidence of suicide has increased but it is still a relatively rare event, with far more adolescents contemplating

suicide or having unsuccessful suicide attempts (Santrock 2006:423). Girls are more likely to attempt suicide than boys but boys are more likely to be “successful” at committing suicide (Carlton & Deanne 2000:35-45). Boys are also inclined to use more lethal means, such as shooting themselves, while girls are more inclined to slit their wrists or take an overdose of sleeping pills, which is less likely to result in death. Hersh (2004:183) stresses that because of the fact that girls are more intentional and thoughtful about ending their lives, there is an increased opportunity for intervention.

Earlier childhood experiences can play a role in suicide attempts (Santrock 2006:424). Adolescents who attempt suicide may have a long-standing history of family instability and unhappiness. Lack of affection and emotional support, high parental control and pressure for achievement by parents during childhood are related to adolescent depression and suicide attempts. Adolescents who attempt suicide may lack supportive friendships. Bearman and Moody (2004:90-95) found that social isolation was linked with suicide attempts in adolescent girls. Genetic factors are associated with adolescent depression and suicide. The closer a person is genetically related to a person who has committed suicide the more likely that person is to also commit suicide (Santrock 2004:424). While not all depressed adolescents are suicidal, depression still remains the most frequently cited factor associated with adolescent suicide. Other factors often associated with adolescent suicide include: a sense of hopelessness, low self-esteem and high self-blame.

3.6.8.3 Self-mutilation

Cutting (the habit of making small, shallow incisions on one's body) and other forms of self-mutilation are not new, but are becoming more common amongst adolescents (Townsend 2006:183-186). Adolescents from varying socio-economic backgrounds engage in this type of behaviour. While there are different kinds of self-mutilation and varying degrees of severity, cutting and burning are the most common. Sometimes adolescents will expose their cuts or burns by wearing clothes which do not hide them. This could indicate a desire for parents or peers to notice that they are having a problem without having to verbalise the problem. I have found this type of behaviour quite prevalent in

adolescent clients suffering with depression. Self-mutilation indicates the presence of deeper issues, even when the adolescent has no idea what the deeper issue may be.

This destructive behaviour is most distressing to parents and it is important that they are aware of the warning signs which may indicate that their adolescents are engaging in this type of behaviour. Parents often find it difficult to understand why their adolescent children would choose to behave in this manner. Research has highlighted some reasons for this type of behaviour in adolescents (Townsend 2006:184-1850). These could be that they:

- feel nothing (or are emotionally disconnected) and the pain makes them feel something, making them feel alive;
- need a way to outwardly express their pain;
- feel that they need to be punished for something they've done or for being a 'bad' person;
- are re-enacting some trauma or abuse in an attempt to try and solve it;
- are attempting to replace negative feelings with positive ones (with the pain of self-mutilation releasing endorphins in the body that creates a sense of well being);
- want to connect with peers (and may see self-mutilation as a way of identifying with other adolescents who are engaging in similar behaviours); and/or
- 'bio-chemical' factors are playing a role (with the reason for self-mutilation being physiologically, rather than emotionally, induced).

3.6.8.4 Anxiety

Hersh (2004:99) stresses that anxiety is a common problem among adolescents. In 2003, counsellors in the United States of America reported a six-fold increase in the number of adolescents seeking help for anxiety-related issues (Cowley 2003:44). Many adolescents have difficulty achieving at school, become isolated or withdrawn or experience physical aches and pains as a result of anxiety. Depression, withdrawal, eating disorders and acting out behaviour are often associated with anxiety. An increasing number of adolescents are using alcohol and drugs to subdue anxiety. Hersh (2004:99) cautions that anxiety does not always manifest itself in extreme behaviour. It can range from panic

attacks and social withdrawal to everyday stressful experiences, for example doing homework and household chores while also having to cope with demanding younger siblings and fretting over personal issues such as the discovery of a new pimple or having to decide what to wear.

Parents need to remember that “since adolescent life is lived on an intensified scale, stress is an unavoidable part of adolescent experience” (Hersh 2004:101-102). When parents examine their own schedules, budgets and tasks, adolescents’ lives may seem much less stressful when compared to that of parents. To the adolescents, however, life can prove extremely stressful. Cowley (2003:44) warns that, even at low levels, anxiety can cause muscle tension, vulnerability to illness and impaired judgment.

3.6.8.5 Disorder eating or eating disorders

Dilley and Clitheroe (2002:6-7) define disorder eating as “eating inappropriately, that is, eating when not physically hungry, usually in response to emotions”. For example, people may eat a chocolate when feeling depressed in an attempt to feel better. Many people do this but the problem comes in when the adolescent does it so often that weight gain occurs. In addition to this, disorder eating also occurs when, for example, eating chocolate results in guilt and/or regret which then lead to excessive dieting, fasting, exercise or even bingeing.

Eating disorders, such as anorexia nervosa and bulimia nervosa, are personality disorders that result in much more extreme behaviour and they are far less common than disorder eating (Dilley & Clitheroe 2002:7). Such eating disorders have, however, become increasingly common during adolescence. Santrock (2006:378-379) gives the following summary of research findings involving adolescent eating disorders or disorder eating:

- Girls who have negative feelings about their bodies in early adolescence are more likely to develop eating disorders, two years later, than girls who do not have such negative feelings.
- Negative parent-adolescent relationships are linked with increased dieting in adolescent girls.

- Girls, who are both in pubertal transition and sexually active with their boyfriends, are more likely to be dieting or engaging in disordered eating patterns.
- Adolescent girls who watch more than four hours of television per day are more inclined to be overweight than those who watch for a shorter period of time.
- Since the 1960's, there has been an increase in the percentage of adolescents who are overweight.

Anorexia nervosa is an eating disorder that involves “the relentless pursuit of thinness through starvation” and is a serious disorder that can lead to death (Santrock 2006:379). The three main characteristics of anorexia nervosa include: weighing less than 85 percent of what is deemed normal for one’s age and height; having an intense fear of gaining weight, with weight loss not resulting in a decrease in this fear; and having a distorted body image, still regarding oneself as fat even when extremely thin.

Anorexia nervosa usually develops in the early or middle years of adolescence, often following a dieting episode or some kind of life stress. It is about 10 times more likely to occur in girls than in boys, and when it does occur in boys, the symptoms and other characteristics (such as family conflict) are usually similar to those of females suffering with this disorder (Santrock 2006:379).

According to Schmidt (2003:130-137), the majority of anorexics are white adolescent or young adult females from well-educated, middle to upper class families and are competitive and high achievers. These girls often set high standards, become stressed when they fail to reach these standards, and become very concerned about how others perceive them. Often when unable to meet expectations they turn to something they can control, namely, their weight. In addition to this the media has consistently promoted the idea that ‘thin is beautiful’ and that one can never be ‘too thin’. Many adolescents’ dissatisfaction with their bodies stems from what they see on television, film or in magazines (Dilley & Clitheroe 2002:7). Adolescents compare themselves to images presented in the media and adolescent boys often feel pressured to develop muscular bodies, while adolescent girls want to conform to the slim model image (Shefer 2004:75).

Bulimia nervosa is an eating disorder in which the individual follows a consistent 'binge-purge' pattern (Santrock 2006:379-380). The individual goes on an eating binge and then purges by self-induced vomiting or using laxatives. As with anorexics, these individuals are often pre-occupied with food, have an intense fear of becoming overweight, and are often depressed or anxious. Bulimics typically fall within the normal weight range and this makes it more difficult for parents to detect bulimia in their adolescent children. One study of adolescent girls found that increased dieting, pressure to be thin, exaggerated emphasis on physical appearance, body dissatisfaction, depression symptoms, low self-esteem, and low social support predicted binge eating two years later (Stice, Presnell & Spangler 2002:131-138).

Although it has been argued that eating disorders are present in affluent societies and middle class families (see discussion above), there is growing evidence that South African youth, particularly adolescent girls, in all communities are at risk (Shefer 2004:75). Caradas et al (2001:112-120) found that the prevalence of abnormal eating attitudes is equally common in South African school girls from different ethnic backgrounds. Parents tend to panic when they realise or are told that their children have an eating disorder (MacFarlane & McPherson 1999:182) but they need to know that it is possible to successfully treat eating disorders. In fact, 70 percent of individuals who develop anorexia nervosa or bulimia nervosa eventually recover from these disorders (Santrock 2006:380).

3.6.9 Adolescent attitudes, needs and behaviours commonly causing conflict

There can be many other changes in adolescents' attitude and behaviour which may be annoying or concerning to parents. Most parents feel, at times, that their sweet child has grown into a difficult, moody, selfish person with a bad attitude. Cowan (2004:9) stresses that the majority of adolescents have times when they have a bad attitude, especially towards their parents. Parents are often hurt by adolescents' behaviour and often over-react as they do not see behaviour for itself but project it forward, asking themselves where it will lead, with the parental response being largely determined by the predicted fear of where the behaviour may lead and often being inappropriate.

We now examine some other common changes in adolescent behaviours and attitudes, which Cowan (2004:10) sees as adding up to a general 'bad attitude' and with most of them directed at, or most disturbing to, the parents. These changes do not happen in every adolescent and some experience mild changes while others experience more severe changes. These behaviours and attitudes may give rise to much parent-adolescent conflict (see also section 3.6.1 above).

3.6.9.1 Privacy and self-consciousness

One strong indication of the onset of adolescence and an indication that the child is no longer a child is when he/she begins to demand privacy (Cowan 2004:19; Smalley & Smalley 2003:5-6). Adolescents may no longer want to have telephone conversations in front of other family members and may take pains to ensure that parents and siblings do not eavesdrop on conversations or have access to diaries, e-mails or letters.

Privacy, in terms of their bodies, becomes very important to adolescents. They are often highly self-conscious and critical of their bodies and may no longer be happy about family members seeing them naked (Cowan 2004:22). Mother may be suddenly banned from the change room and all family members from the bathroom. Adolescents may start closing or locking their bedroom doors; may demand that no-one enter their bedroom when they are not there; and that everyone knock before entering their bedrooms when they are there. While girls are most often bothered by their weight, often perceiving themselves as fat (even when their weight falls in the normal range), boys are more concerned with height and muscularity (Wibbelsman 2006:1).

In my practice, I have worked with many adolescents who are most dissatisfied with their bodies. As indicated in the research, boys who are short or small in stature and girls who are bigger or who regard themselves as overweight often feel self-conscious and depressed. Skin or complexion problems, such as acne, commonly cause adolescents to become self-consciousness or dissatisfied. Adolescents are inclined to compare themselves with others and to become distressed if they 'come up short'.

3.6.9.2 Extreme sensitivity to certain issues

It may be difficult for parents, when suddenly they discover that they can no longer joke with their child or that the child is suddenly offended by something the parent or family member says or does. This may simply mean that the child is growing up and developing his/her own idea of what constitutes a joke, acceptable comments or behaviour. Cowan (2004:25-26) explains that some of the things to which adolescents may be particularly sensitive include jokes or comments about their friends, their clothes, their bodies, their music and societies' norms. Parents may experience this as a time when their adolescent questions everything that is regarded as 'normal' or acceptable to the parents, often regarding the values of parents as worthless, with them testing parents at all times as they search for their own values. Self-consciousness, which is so common during adolescence, (see section 2.3.3.3 and section 3.6.9.1) can also contribute to this extreme sensitivity.

3.6.9.3 Withdrawal from family interaction

Adolescents may no longer want to go out with parents, for example, to visit family members or for recreational purposes (Cowan 2004:27-28). They may not even want to be seen with parents in public places. Adolescents often prefer to stay home alone and when they do go out with parents, they may be reluctant to participate and may spoil the outing for other family members. Parents and family are forced to take "a backseat" as friendships become more valued than family relationships (Smalley & Smalley 2003:6). Adolescents also frequently begin to pull away from their families as they begin to date, finding friends of the opposite sex in whom they can confide and on whom they can depend.

Many adolescents seem to avoid the home, engaging in one social event after the other or simply going off with their friends, leaving parents with the idea that home is simply a place to eat, sleep, have one's washing done and other basic needs met (Townsend 2006:195-197). Once again, parents often feel rejected and may battle to comprehend

how family occasions and activities, that previously were a delight to the child, are now ridiculed and regarded with contempt. Townsend (2006:195-198) warns that parents need to be on the lookout for unhealthy ways of detaching from the family. These include:

- emotional withdrawal (when the adolescent is withdrawn, distant and cold);
- persistent anti-family attitude (when the adolescent challenges family values and relationships all the time); and
- too much investment in the outside world (when the adolescent is so busy outside the home that he/she is unable to get home for the support, connection and stability he/she still needs).

3.6.9.4 Failure to co-operate in the home

Parents often become frustrated because adolescents commonly laze about, have messy bedrooms and are reluctant to help with household chores. Adolescents often argue so much about chores or the state of their bedrooms, that parents simply give up trying to elicit help from them, regarding it as “too much trouble” to motivate their adolescents to play a more active role in the home (Townsend 2006:171-172). Cowan (2004:28) points out that the further adolescents move through their adolescent years, the later they want to sleep in the mornings (see Section 2.2.2.4). This can especially be a problem when there are younger children in the home and duties are supposed to be shared in the mornings.

Much of the parent-adolescent conflict, concerning family and household responsibilities, centres around adolescents who agree to do certain things but then break the agreement, by failing to do as they promised. Townsend (2006:167-168) argues that many adolescents do not have the capacity to keep agreements. To keep agreements requires good judgment, a basis in reality, a future orientation, and an understanding of what is entailed in the agreement. Few adolescents have mastered these skills and they often make all kinds of promises without carefully considering what is involved. They are inclined to be eternally optimistic, thinking things like, “I’ll have time later” but ‘later’ never comes. They tell their parents they will do a task after the party, forgetting that they still need time to complete schoolwork, bath, sleep and the like.

3.6.9.5 The use of telephones and cell phones

The use of the telephone has long been a common source of conflict between parents and adolescents (Cowan 2004:29). Modern parents have to contend with the cell phone as well as the home telephone. Townsend (2006:249-250) argues that most conflict regarding phones revolves around excess. Parents battle to comprehend how adolescents can spend all day with friends and then want to spend all night talking to them on the telephone or cell phone. Talking too much on phones has financial implications and also often means too little attention is given to other aspects of life, such as schoolwork, chores, sleep needs and family relationships.

3.6.9.6 Music and the media

Adolescents tend to love music, especially very loud music, which may be a source of conflict with parents and other adults, such as the neighbours (Cowan 2004:28). They tend to want to choose the radio station; take control of the car radio, compact disc player or television remote; and when parents are not in the vicinity, they may be inclined to turn up the volume.

As with the telephone, the major cause of conflict with media or electronic devices (such as television, MP3 players, radio or the Internet) is excess. Parents become frustrated when adolescents constantly have ear plugs in their ears (listening to music) or seem 'glued' in front of the television or computer screen. Once again, other responsibilities are neglected and adolescents may be escaping or withdrawing from 'real life'. Townsend (2006:223-224) warns parents that media, such as the Internet, can be harmful to adolescents. This is discussed in more detail above (see Section 3.6.3.2).

3.6.9.7 Fashions and fads

Historically, "parent-offending" clothing, hairstyles and body art (such as piercings and tattoos), have been part of adolescents' attempts to find an identity and to express their

individuality and independence (Carr-Gregg 2005:57). Townsend (2006:175) describes the following three types of clothing styles which could be inappropriate for adolescents:

- clothing that is too revealing and sexually appealing;
- clothing that advertises negative influences such as drugs, sex, violence and death; and
- clothing that reflects alliances with unhealthy cultures such as gangs.

Parents may disagree with adolescents spending much money on clothing or fashion styles, especially those which are disagreeable to parents. Smalley and Smalley (2003:7-8) warn that adolescents tend to focus excessively on their looks, giving “this aspect of their personhood too much importance – either capitalizing on good looks or despairing over average ones”. This is often the reason why many adolescents struggle with body image and eating disorders (see section 3.6.8.5).

3.6.9.8 Driving and cars

Adolescents beginning to drive can be very anxiety provoking to parents. Townsend (2006:205) describes this situation well in the following statement: “Here is the situation: someone whose brain has not yet finished developing, especially in judgment and impulse control, is operating a huge, metal machine that can go really fast. Is this really a good idea?” As mentioned earlier (see section 3.6.3.3), driving certainly puts adolescents at risk of accidents and injury, with a high percentage of adolescent deaths in many countries, being due to accidents involving motor vehicles (Carr-Gregg 2005:90-91; Santrock 2006:382; Townsend 2006:205-206).

Teaching adolescents to drive can be rewarding but also requires much patience on the part of parents, and can potentially be a source of tension and conflict. Other driving issues include:

- the increased autonomy, choices and responsibilities which driving places on the adolescent; and

- parental decisions concerning driving, such as when to allow adolescents to take their driving test; how often, when and where they should be allowed to drive; and whether they should be given a car (Townsend 2006:205-206).

3.6.9.9 Violation of rules and boundaries

It can be very challenging to parents when their adolescent children disregard boundaries or ignore or break rules. Parents may find it difficult to consistently discipline their adolescent children effectively, by setting limits, enforcing rules and by attempting to be neither too lenient nor too harsh (Smalley & Smalley 2003:3). Townsend (2006:32) states that “it is no secret that teens try to wear their parents down” by persistently pushing until parents finally “give in, drop the issue, or postpone the consequences”.

Curfew violation (coming home after the agreed upon time) is a common cause of parent-adolescent conflict (Townsend 2006:179-182). Adolescents seldom choose to come home late. They think things like, “I can have one more game in record time”, but then reality wins over wishful thinking, and they are late for their curfew. Parents may over-react, calmly enforce consequences or allow adolescents’ violations to go unnoticed and unpunished. Each of these different responses can have an important effect on the parent-adolescent relationship and the development of the adolescent.

3.7 THE INFLUENCE OF FAMILY STRUCTURE ON THE PARENTING ROLE

Santrock (2006:275) stresses that more children are being reared in diverse family structures than ever before. As couples with children may divorce, never get married, or never live together, types of family structure have multiplied (Kleist 1999:373). The increase in the number of single-parent families has been staggering (Martin, Emery & Peris 2004: 282-283). Divorce has played a major role in this diversity in family structure. Some single-parent families come into being as a result of divorce. In addition to this, after divorce, many people choose to remarry, sometimes choosing partners who have been single or married before, and these partners may or may not have children. The relationship joined together by a remarriage becomes a ‘blended-extended family’ or

step-family (LeBey 2005:1). In addition to this, many mothers spend a major portion of each day away from their children (even young infants). Increasing numbers of children are growing up in gay and lesbian families (Santrock 2006:343). In my practice, I have been struck by the high proportion of families that have experienced divorce; single-parent families; blended-extended families; or families in which both parents work (with many mothers going back to work when their babies are only a few months old). We now make a more detailed examination of each of these family structures.

3.7.1 Working parents

Maternal employment seems to be a part of modern life, with it not necessarily “being an aberrant aspect but rather a response to other social changes” (Santrock 2006:275). Because household operations have become more efficient (with modern equipment such as washing machines, vacuum cleaners and microwave ovens) and because family size has decreased, it does not necessarily mean that when both parents work outside the home, children receive less attention than children in the past whose mothers did not work outside the home. Outside employment might just be filling up time previously used up by more household burdens and more children. It cannot be assumed that mothering by stay-at home mothers always has a positive effect. Educated, non-working mothers, for example, may be inclined to spend too much time and effort on children, with this attention sometimes creating excess worry and interfering with the children’s independence. The growing child needs the mother to loosen her hold and allow increased independence. This task is often easier for a working mother, whose work often provides an additional source of identity and self-esteem.

While some research has found no harmful effects of maternal employment on parenting (Gottfried, Gottfried & Bathurst 2002); in specific circumstances, work can cause positive or negative effects on parenting (Crouter & Booth 2004; Galinsky 2000:64,67). On the one hand, work-related stress can “spill over and harm parenting, and on the other hand, parents’ improved overall sense of well being can result in more positive parenting”. Researchers have, however, consistently found that when mothers work in

the child's first year of life, it can have a negative effect on the child's later development (Santrock 2006:275).

Santrock (2006: 275-276) reports on a longitudinal study carried out by Brooks-Gunn, Han and Waldfogel. They found that three-year old children whose mothers took outside employment before the child was nine months old, had poorer cognitive outcomes than three-year old children whose mothers remained at home with them until they were at least nine months old. These negative effects were less pronounced when mothers were responsive and caring in their care giving; when mothers worked less than 30 hours per week; and when the quality of care giving outside the home was of a higher quality. This shows that when a mother goes back to work within the child's first year of life, it is important that careful consideration be given to the number of hours worked, the sensitivity of their mothering and the quality of the substitute child care (Santrock 2006:275-276)

While, both parents working outside the home may not necessarily have negative outcomes on parenting, there is a certain group of children from dual-earner families that deserves a closer examination (Santrock 2006:344-345). These are children who do not see their parents from early in the morning until about six or seven in the evening. These children are also sometimes referred to as "latchkey" children, because they are given the key to their homes, let themselves in every afternoon after school and stay alone (or with siblings) until their parents come home in the evenings. These children are thus left without parental or adult supervision for a few hours every afternoon of the school week. During holidays, they might be unsupervised for the whole day, five days per week. These children, without limits and parental supervision, land in trouble more easily, possibly stealing, vandalising, or abusing a sibling. Ninety percent of juvenile delinquents in Montgomery County, Maryland in the USA are latchkey children. These children may also be forced to grow up prematurely because of all the responsibilities placed upon them. They also may feel very alone, having little contact especially with adults (Smith 2003:167-168,172).

Latch-key children may be vulnerable to problems, but variations in the experiences of such children, suggest that other factors also play a role. Research has shown that effective parental monitoring and authoritative parenting (see section 3.4.3) help children cope more effectively with latch-key experiences, especially to resist negative peer group pressure (Santrock 2006:345). Attending a formal after-school programme, which includes academic, recreational and remedial activities, has been associated with better school achievement and social adjustment than other types of informal after-school care (such as informal adult supervision).

3.7.2 Homosexual parents

Gay and lesbian couples are increasingly creating families that include children (Santrock 2006:277). This is controversial as many heterosexual people view this kind of family as damaging to the development of the child. About 20 percent of lesbians and 10 percent of gay men are parents, with most of them having children from a previous heterosexual marriage which ended in divorce. Many lesbian and gay fathers have lost custody of their children to their heterosexual spouses after divorce. It is for this reason, that many lesbian mothers and gay fathers are non-custodial parents.

Patterson (2002) stresses that an important factor in such families is the sexual identity of parents at the time of the child's birth or adoption. Most children with homosexual parents, were born in the context of a heterosexual relationship, with either one or both of the parents later identifying themselves as homosexual. Homosexual parents are either single or have same-gender partners. It is becoming increasingly common for lesbians and gay men to become parents by way of donor insemination and surrogate parents.

Research has shown few differences between children growing up with homosexual parents and those growing up with heterosexual parents (Patterson 2002). Research findings indicate that children growing up with homosexual parents:

- are just as popular with their peers;
- show no differences in their adjustment and mental health (in comparison to children with heterosexual parents); and

- most often develop a heterosexual orientation.

3.7.3 Divorce

The question often asked, is whether parents should stay in an unhappy or conflicted marriage for the sake of the children. Santrock (2006:276) shows that the answer to this question is not a simple one and highlights the following aspects of this dilemma:

- if the stresses and disruptions of an unhappy marriage relationship, which impact negatively on the well-being of children in the home, can be reduced by changing to a divorced, single-parent arrangement, divorce could be an advantageous option;
- if the decrease in resources and increased risks associated with divorce are accompanied by poor parenting and continued or increased conflict, between the divorced couple as well as among the stepparents, children and siblings, it would probably be more beneficial to stay in the unhappy marriage (Hetherington & Stanley-Hagan 2002); and
- it is difficult to know how the above situations will play out when parents either choose to stay in an unhappy, stressful marriage or choose to divorce.

In South Africa, one out of every two marriages ends in divorce (FAMSA 2007:1). When parents divorce the impact on both parents and children can be enormous. These effects are discussed below.

3.7.3.1 The effects of divorce on children and adolescents

Divorce usually represents a loss for everyone it touches (Emery 2004:46; 60). For children, it is often their first experience of a major life crisis. The centre of their world (the family) is torn apart and they need to grieve this loss and find new security. The grief process following divorce is discussed below (see 3.7.3.2). After divorce, children frequently have to adapt to economic hardships; changes in residence and schools; and damaged or changed parental relationships (Emery 2004:63). It turns their lives upside down, often undermining relationships with both parents and reducing contact with at least one

parent. Children have to adapt to life in two households, which can be particularly difficult for adolescents who value their privacy and who have busy lives that are further complicated by this type of living arrangement. Children usually miss having their parents together and hanker after previous family activities and routines. Once children reach adolescence, they may experience difficulty with custodial arrangements. Emery (2004:189) found that most adolescents cope better with having one home as their main headquarter - even if they previously lived happily with joint custody. This is also the time when many want to change and live with the other parent, especially the same sex parent.

Most researchers agree that children from divorced families show poorer adjustment than children from intact families (Emery 2004:64; Hetherington & Stanley-Hagan 2002; Martin et al 2004:285). Those children who have experienced multiple divorces are at an even greater risk. Common difficulties of children from divorced families include:

- academic problems (including dropping out of school);
- behaviour problems (such as acting out and delinquency);
- emotional difficulties (such as anxiety, depression and low self-esteem);
- difficulty in having competent intimate relationships;
- being less socially responsible;
- engaging in risky sexual behaviour at an early age;
- drug abuse difficulties; and
- susceptibility to negative peer pressure.

Research has highlighted some common emotional reactions which children and adolescents may experience when their parents divorce (FAMSA 2007:1). The most overwhelming emotion is intense sadness which can persist for a long period. This sadness may be caused by the loss of one parent or the family unit and the fact that one or both parents may be less emotionally available and/or too busy to spend much time with the children. Children may hold onto this sadness, believing that if they do remain sad, their parents may re-unite and if they give up their sadness, it would mean accepting the divorce and being disloyal to the parent who has left or the parent who did not want the divorce.

Children may also feel abandoned by the parent who left and may fear that they will be abandoned by the remaining parent. Fear is a big aspect of divorce as children may feel that “their world is no longer safe, secure and predictable”. They may have fears about who will take care of them, who will take them to school and about other changes in life style and living arrangements. They also worry about financial concerns, their ability to cope and the possible loss of relationships with their grandparents or other extended family members. Furthermore they may be concerned about what their friends and teachers will think and whether or not they should tell others about the changes in their family. Some children even feel ashamed about their parents’ divorce.

Children are often confused by divorce as they may not be able to understand the reasons for the divorce. This confusion may lead them to think that they may in some way be to blame for the divorce. They may feel guilty about this and may feel torn between the two parents, thinking that they have to choose one or the other parent to love. In addition to the above mentioned common emotional reactions, children of divorced parents commonly experience:

- anger and/or a critical attitude to one or both of their parents;
- concerns about whether they are still loved (by one or both parents);
- loyalty issues (for example, if they agree with one parent on an issue, they may feel disloyal to the other parent);
- concern over parents’ or siblings’ well-being;
- difficulty coping with parents’ animosity for one another; and
- the need to hide things from one or both parents in an effort to reduce conflict.

The age of the child may play a part in determining reactions to divorce (Gerdes 1998:193-194). Young children (of about two or three years) may experience anxiety and bewilderment which may be expressed in regressive behaviour (that is, reverting to earlier behaviours such as thumb sucking or bed wetting). Children between the ages of three and five commonly show a loss of self-confidence and often blame themselves for their parents’ separation. They may think that the departing parent is leaving *them*, not the other parent. Loss of the father at this stage seems to be particularly difficult for boys.

In the early school years, children's reactions to divorce seem to be less observable but their schoolwork may suffer and they may still be upset, saddened and frightened. While nine and 10 year olds are inclined to try to understand the divorce, this does not alleviate underlying feelings of sadness, anger and confusion. Early adolescents are often better able to understand divorce but this does not mean they are emotionally less affected.

Divorce can be very disruptive in the lives of adolescents (Emery 2004:120). Children and adolescents may experience emotional turmoil, but adolescents may take longer to sort out their emotions. Adolescents have an increased intellectual capacity to understand, reason and learn but limited experience using their reasoning ability. In addition, strong emotions and peer influences can also cloud their thinking (Emery 2004:189). Divorce often comes as a shock to children and adolescents and it is important that parents convey the decision to their children in the most suitable way. Adolescents may be much more critical and require explanations or reasons for divorce, including who is responsible for the decision to separate (Emery 2004:119).

One danger of divorce is 'parentification' which refers to a role reversal, for example when a needy or overwhelmed parent becomes dependent on children for assistance and emotional support (Emery 2004:226; Jurkovic, Thirkild & Morrell 2001:246). This often happens with the eldest child, only child or adolescent children who are expected to take on adult responsibilities. These responsibilities can be 'instrumental' or 'expressive' (also termed emotional). Instrumental responsibilities refer to maintaining the physical well-being of the family, such as cleaning the house, caring for siblings or earning an income. Expressive or emotional responsibilities involve seeing to the socio-emotional needs of the family. Examples of this would be acting as an emotional confidante to a depressed parent or mediating conflict. Parents may be inclined to share 'adult problems' with their children (such as the state of their finances, the depth of their despair, or concerns over where they will live or how they will cope), putting them in the role of being a 'caretaker kid' – having to take care of the parent's emotional needs. This can have a detrimental effect on children, robbing them of their childhood, leaving their own needs largely unmet and causing them to shoulder responsibilities for which they are developmentally unprepared. Instrumental and emotional parentification in adolescence has been found to be predictive of adjustment difficulties in young adulthood (Jurkovic et al 2001:247).

Emery (2004:5-6) stresses that while divorce causes a deeply painful time for most children, this intense pain does not necessarily last forever as most children are resilient. How children cope is determined to a large degree by parents' behaviour. Children cope better when parents are co-operative and try to limit their children's exposure to conflict. Much effort by parents is needed to ensure that children recover and are emotionally healthy after divorce. Parents need to handle all aspects of the divorce in a responsible, adult way, they need to deal with their own feelings in a way which is not harmful to their children, and they need to put their children's needs before their own.

Emery (2004:77-80) warns that even for the most resilient children, however, the pain of divorce never completely ends, as illustrated in the following findings:

- 73% of young adults believe they would have been a different person had their parents not divorced;
- 49% experience worries over big events where both parents would be present (for example, weddings and graduations);
- 48% felt they had more difficult childhood than most people; and
- 28% wondered if their fathers loved them.

3.7.3.2 Effects of divorce on parents

Emery (2004:27) stresses that parents and children experience grief as a result of divorce. This grief differs from other types of grief in that divorce never really ends as there can be a chance of reconciliation and, if there are children, there can never be a "clean break". Divorce-related grief seems to be cyclic in nature, with people repeatedly moving through a three-part phase consisting of love, anger and sadness (Emery 2004:28-29, 39). The 'leaver' (the spouse who wanted the divorce) and the 'left' (the other spouse) go through the same phases but they are not usually "at the same place at the same time". In the beginning, these emotions are intense and experienced one at a time but after a while they tend to become blended and the intensity seems to diminish. When this blending does not occur, people may become 'stuck' in one of the phases. Those stuck in the love phase may not accept the reality of the break up, be unable to move on and

pine for reconciliation; those stuck in the anger phase may become caught up in revenge and vindictiveness; and those stuck in the sadness phase may “assume an exaggerated and unrealistic sense of responsibility for what has occurred”. Parents or children who do not successfully negotiate this grieving process commonly have anger problems, with anger often being “the toxic residue of unresolved grief”.

For most parents, divorce is painful and involves an ongoing struggle to “build a new relationship and re-define their roles” (Emery 2004:13, 44). The most important challenge that each person faces is not ending relationships but renegotiating and redefining them. “Through the many tasks of divorce parents and children must accomplish – renegotiating relationships, learning to establish and relate to one another with new boundaries, adjusting to new circumstances, finding a place and an identity within a shifting family “frame” – they face fresh opportunities to revisit old hurts and expose themselves to new ones” (Emery 2004:27).

Many non-residential parents fail to make new boundaries of parental love and many, especially fathers, drop out of their children’s lives (Emery 2004:222-226; LeBey 2005:67-68). They may feel redundant and ineffective as parents, often mistakenly thinking that their children no longer need them or that their children will be better off without them. Residential parents may have difficulty establishing definite boundaries of parental authority. Most of the responsibility for disciplining falls on their shoulders. Emery (2004:217) warns against allowing parental guilt over divorce to interfere with effective disciplining of children. Divorce can make disciplining, especially during the adolescent years, more complicated for parents (FAMSA 2007:1). Parental conflict over rules and boundaries may make it easier for children to use manipulation or other means to undermine parental authority.

Some tasks divorcing parents need to accomplish include: working through grief, limiting conflict, becoming co-parents, resolving legal issues, and parenting singly in an effective manner (Emery 2004:6-13; Worth & Tuffnell 2001). Many of these tasks must be done simultaneously and at a time when parents are emotionally in crisis themselves. Parents have to handle their own emotions, sometimes setting their feelings aside, in order to address the needs of their children (Worth & Tuffnell 2001:25-38; 95-109 & 113-122).

Parents also have to cope with the conflict arising from divorce, trying to reduce conflict and increase co-operation (Emery 2004:6-13).

3.7.3.3 Mediating factors in divorce effects

Divorce affects some children more adversely than others. Some children are better able to cope with the stress of divorce than others (Gerdes 1998:197-199). A distinction can be made between children who are vulnerable (that is, children who are easily distressed) and those who are resilient (that is, those who are better able to cope with the stress and who are able to thrive in spite of the adverse experience). Certain factors seem to shield resilient children, protecting them from the adverse effects of divorce stress. Some of the factors involved in the child's risk and vulnerability (Gerdes 1998:197; Hetherington and Stanley-Hagan 2002) include:

- the child's personality and temperament;
- family life and processes;
- custodial arrangements;
- gender;
- the child's level of adjustment before the divorce; and
- available support.

Socially mature, responsible children, who display few behaviour difficulties and who have an easy temperament are better able to adjust after their parents' divorce. Children with more difficult temperaments may find it very difficult to cope (Hetherington & Stanley-Hagan 2002). Resilient children tend to be cheerful, friendly, co-operative and low in defensiveness and aggression (Gerdes 1998:197). They usually have a positive self-image and have confidence in their ability to deal with stressful situations, rather than a sense of helplessness. They are often also described as thoughtful and not impulsive in nature.

Family processes play an important role in divorced families (Hetherington & Stanley-Hagan 2002). Resilient children commonly come from families where there is an

atmosphere of love, emotional warmth and closeness, and where, at least one person in the family, shows a special interest in the child (Gerdes 1998:197-198). These families also:

- offer some protection against insecurity and threats;
- have clear guidelines or rules in the home (with the roles of parents and children being clearly understood); and
- have parents who are helpful role models, showing children how to handle difficult situations constructively.

Harmonious relationships between divorced parents and authoritative parenting are effective in improving children's adjustment after divorce (Gerdes 1998:196-198; Hetherington & Stanley-Hagan 2002). While diminishing parenting skills have been shown to occur in the year immediately following divorce, two years after the divorce parents become more secure and stable in their roles and parenting skills commonly improve.

Santrock (2006:277) stresses that whereas before it was accepted that divorce was more negative for boys than for girls (in mother-custody families); recent studies have found these differences to be less pronounced and this may be a result of:

- the increase in father custody;
- the increase in joint custody; and
- increased involvement of non-custodial fathers (especially in their sons' lives).

Children in joint-custody situations appear to be better adjusted than those in single-custody families (Bauserman 2002:91-102). Santrock (2006:277) reports that, while some studies have found that girls adjust better in mother-custody families and boys adjust better in father-custody families, other studies have not found this to be the case.

The effects of divorce will also vary according to the circumstances preceding it (Gerdes 1998:193-194). It may be less stressful separating from an uninterested, abusive or seductive parent than separating from a loved, caring and trusted parent. The greatest shock may be experienced by children who have believed their parents' marriage to be happy and are thus totally unprepared for the divorce.

Support can play a mediating role in the effects of divorce. In the midst of the difficulties and stress brought on by divorce, resilient children commonly can count on support from teachers, peers, older members of the family, relatives or members of their religious community (Gerdes 1998:198). These people offer emotional support, encouragement and often act as role models, providing examples of how to cope effectively with stress.

3.7.4 Single-parent families

3.7.4.1 Types of single-parent families

Single-parenting refers to the situation in which one parent (either the mother or the father) carries out the role of maintaining the family, without the presence of the other parent in the home (Fox 2007:1). Four main ways in which single-parent families arise are:

- personal choice (as in adoption, artificial insemination, surrogate motherhood or extramarital pregnancy);
- the death of a parent;
- divorce; or
- abandonment of the family unit by one parent.

3.7.4.2 The challenges involved in single-parenting

Single-parenting families that come into being as a result of personal choice do not have the added stress arising after the turmoil of death, divorce or abandonment (Codrington & Grant-Marshall 2004:97). The effects of divorce have been discussed above (see Section 3.7.3). Research shows that many single-parent families report the positive effects which arise after the two parents no longer live together (Kleist 1999:373). There is often a reduction in conflict and tension and mothers indicate experiencing their single-parent household “as more cohesive, with more time to spend with the children and the ability to raise the children as they see fit versus having to negotiate values and beliefs with the other parent”. Mothers are also quick to point out the difficulties of single parenting,

acknowledging that adapting after divorce is a lengthy process, with it taking an average of four years to feel 'settled'. Single-parenting adolescent children can be overwhelming and challenging. We now examine some of the primary challenges facing such parents.

Firstly, single parents have to 'do it alone', having the constant pressure of adult responsibilities without the immediate relief available from the other parent (Fox 2007:2; Kleist 1999:374). Single-parents have to do the work of two parents, often with more limited resources than two-parent families, both in quantity and ability (Townsend 2006:55-56). Adolescents are inclined to test parents' limits and authority. Parents who have a spouse can take a break from the demands of parenting, handing their adolescent over to the other parent when they feel worn out. Single parents do not have the opportunity to 'rest and regroup' so they may become exhausted and lack the emotional strength to cope with their adolescent's resistance. They may thus give in to adolescent demands and may experience problems setting limits or disciplining effectively. There is strong evidence to support the contention that single parents (both single mothers and single fathers) experience more behaviour problems with their children than married parents (Kleist 1999:375).

Single parents may also lack the time and energy to connect effectively with the adolescent, who needs this bonding time in order to feel safe, loved and to be able to navigate through the challenges of adolescence. Single parents do not only have limited quantity of emotional resources, they also have more limited abilities as "no one parent can provide all of the parental 'nutrients' an adolescent needs: grace, empathy, validation, structure, limits, and discipline" (Townsend 2006:56).

According to Townsend (2006:57), single parents are inclined to 'rescue' their adolescents, not allowing them to fail or to experience the consequences of their actions. Guilt feelings usually drive parents to engage in this 'rescue' behaviour. They often feel guilty about their child's situation and partially to blame for the fact that their adolescent does not have two parents in the home. For this reason, single parents may indulge their adolescent and fail to enforce the consequences that should follow behaviour and attitude violations. This may prevent the adolescent from developing self-control.

Single parents often fall into the 'parentification' trap (see section 3.7.3.1), when they begin to rely too heavily on their adolescents to fulfill emotional and other needs. Adolescents look and behave much like adults, which makes it easy for parents to begin depending on them, with the adolescent "becoming a confidant, a sounding board, a listener, a problem solver, and someone to talk to on a Friday night" (Townsend 2006:57). This is dangerous because the adolescent is too concerned with supporting the parent to be able to experience and cope effectively with his or her own struggles or challenges.

When single parents begin to date, this can cause stress for the adolescents, especially when parents prematurely allow their adolescent to connect with someone they are dating (Townsend 2006:58). The adolescent may also become attached to the new person, beginning to transfer needs for the other parent onto this new person. If the parent's relationship with this person ends, however, the adolescent may experience the pain associated with divorce. If the parent has multiple relationships and breakups, it can cause much anguish for the adolescent. It is also not uncommon for adolescents, whose single parents begin dating, to experience feelings of rejection when the parent begins to give attention to the person being dated.

Many single parents also have the challenge of coping with conflict with the child's other parent. Parents frequently differ in their parenting values and the single parent may notice that the adolescent seems inclined to have a bad attitude or to misbehave after having spent time with the other parent (Townsend 2006:58). This may be attributed, in part, to the adolescent having to make the transition and adjustment between the two different households. It may also be the result of the fact that the other parent has different rules and limits. This conflict can be most distressing to the child, affecting his or her well-being. Kleist (1999:376-378) stresses, however, that research has shown that family processes (such as, level of conflict) have a greater effect on the child's well-being than family structure. Single-parent families with little conflict can thus be more beneficial to the child's well-being than two-parent families in which there is much tension and conflict.

Single-parents may experience difficulties as a result of financial constraints. Research on the differences between the adjustment of children in single-parent and two-parent families has shown that social class has more of an effect on adjustment than family structure (MacFarlane & McPherson (1999:227-228). Two factors can make it easier for fathers to take on the primary-parenting role than for mothers to take on this role (Kleist 1999:374-375). Firstly, institutional factors support the father role, for example, because of their uniqueness in number, society may support single father's efforts to succeed more than single mothers. Secondly, institutional barriers for single mothers, such as differences in earning potential and less access to education or occupational training, may contribute to problems which mothers may experience with the primary provider role.

While single-parenting can be challenging, research indicates that single-parent families are more similar than different to two-parent families in their ability to foster child well-being (Kleist 1999:377-378). In addition to this, it has been shown that family processes (such as level of conflict) have a greater effect on well being than family structure. Research does, however, show that contextual variables (such as living arrangements or financial constraints), may increase negative family processes (such as family conflict).

3.7.5 Step-families

The number of remarriages involving children is on the rise and about half of the children, whose parents divorce, will have a step-parent within four years of their parents splitting up (Santrock 2006:344). While some step-families come into being as a result of death of one of the parents, most step-families are formed as a result of divorce (Pasley & Moorefield 2004:317).

3.7.5.1 The structure of step-families

There are three common types of step-families, namely: step-father families; step-mother families and blended-extended, reconstituted or complex families (Santrock 2006:344). Step-father families commonly arise when the mother receives custody of the children

(after divorce) and then remarries, introducing a step-father into the family. In step-mother families, the father usually receives custody of the children (after divorce) and then remarries, introducing a step-mother into the family. Both step-mother and step-father families can also arise after one of the parents die and the remaining parent remarries, introducing a step-parent into the children's lives. In the case of complex or blended-extended families, both parents bring children, from previous marriages or relationships, to live in a newly formed step-family. The blended-extended family, while having most of the challenges of the other types of step-families, has many problems unique to such families and is discussed in a separate section (see section 3.7.6).

3.7.5.2 Research findings on parenting and relations in step-families

While divorce and step-families can give rise to problems, it must be remembered that, as with divorced children, the majority of children from step-families do not experience major problems. In one study, 20 percent of children from step-families showed adjustment problems, compared with 10 percent of children from non-divorced families (Hetherington & Stanley-Hagan 2002). In a summary of research findings on family relations in step-families, Santrock (2006:344) highlighted that:

- children had better relations with their own biological or custodial parents than with their step-parents;
- children in simple step-families (that is with a step-mother or step-father) often show better adjustment than children in complex (blended-extended) families;
- children in step-families, as in divorced families, show more adjustment problems than children from non-divorced or intact families (with these problems commonly being academic and self-esteem difficulties); and
- early adolescence is a particularly difficult time for the formation of step-families (with this possibly occurring because step-family circumstances “exacerbate normal adolescent concerns about identity, sexuality, and autonomy”).

3.7.5.3 Challenges involved in step-parenting adolescents

As MacFarlane and McPherson (1999:142) point out, the term step-parent, like the term 'mother-in-law', has "almost mythical overtones within our society of incompatibility, difficulty, even wickedness". In most children's stories, like 'Cinderella' or 'Snow White' the step-parent is seen in a very negative light (FAMSA 2007:1). This means that this relatively common role of step-parenting, which is a challenging role to begin with, has the added burden of being 'bad-mouthed' or viewed negatively in advance. It is also very difficult for the step-child, who is now expected to begin to relate to a third parent, who may be "supplanting a real, biological parent". It is no wonder, therefore that the introduction of step-parents seems to set the stage for "operatic or maybe pantomime dramas" between the adolescent, the step-parent and other people in the adolescent's life (MacFarlane & McPherson 1999:142).

Remarriage is yet another, often difficult, transition for children who have already experienced the pain of divorce or the death of a parent (Emery 2004:258). Children, especially adolescent children, may find it difficult to accept their parents' new relationships. They may resent the new person's intrusion and loyalty to their other parent (for example, concern over their other parent's hurt or loneliness) may make them apprehensive about allowing the new person to become too close to them. The adolescent and step-parent may seem to be in competition for the love of the same person, which can be "confusing and challenging if you are a young person desperate for attention and security to support you during adolescent challenges of self-identification in the outside world" (MacFarlane & McPherson 1999:142).

Adolescents may be reluctant to allow step-parents to have any authority in their lives, even when they live with them, which means the step-parent "has responsibility without authority" (Townsend 2006:61). Step-parents thus recognise problems and opportunities but do not have authority to control these, which results in step-parents often feeling helpless. A step-parent who is relatively new in an adolescent's life tends to be more at a disadvantage than one who has been in the adolescent's life for a few years. Children need time to attach, trust and respect step-parents. It is not uncommon, however, for

step-parents who have been in the adolescent's life for a long time, to still have to deal with the challenge of not been seen as an authority, with adolescents' often saying things like, "You are not my mother (or father) so I don't have to listen to you".

New step-parents are frequently unprepared for resistance from their new spouse's children (Townsend 2006:61-62). They are often hopeful that love will heal past hurts (especially those caused by divorce or the death of a parent) and that they are going to help to create a new, happy family. Reality and history, however, "can't be erased, nor should they be". Step-parents may feel discouraged by the conflicts they have in the three main relationships having to do with the adolescent, namely, the adolescent, their spouse and the other parent.

3.7.6 The challenges of blended-extended or reconstituted families

According to the *American Demographics* magazine (LeBey 2005:3), since the year 2000, the blended-extended family has become the dominant family structure in the United States of America, with more than 50 percent of United States families falling in this category. These reconstituted families have a very high failure rate, which has a devastating effect on the children. Ironically, it is often the children who try to sabotage the remarriage for reasons of their own, for example, to attempt to bring their parents back together or because they are encouraged by angry ex-spouses or ex-spouses who are in denial. When these marriages fail, the children suffer severe loss yet again. They have frequently already experienced the death of a parent or the divorce of their parents and the major adjustment to the new blended-extended family, and "now they must face another disconnect, another dislocation, another trauma to their young lives". Because of the risk of failure and the trauma caused to children, it is important that couples prepare themselves for the problems they inevitably will face.

LeBey (2005:9-39) describes remarriage and the creation of a reconstituted family as an "obstacle course" because it involves so many challenges. We now take a brief look at some of these challenges.

3.7.6.1 Divided loyalties, guilt feelings, manipulation and jealousy

In reconstituted families, divided loyalties are almost inevitable (FAMSA 2007:1; LeBey 2005:23-24). Divided loyalties include:

- parents who battle to balance loyalties between their own children and their new partners;
- parents who may feel torn between loyalty to their natural children and loyalty to their step-children;
- children who may believe that they need to take sides between their divorced natural parents, with it being common for them to believe that accepting and loving a new step-parent means being disloyal to the natural parent; and
- children who may “experience divided loyalties between whole siblings, step-siblings, and half siblings”.

Children who believe they need to take sides, may boycott the other parent, for example, refusing to visit or accept presents or telephone calls from that parent. Adolescents and older children could even go as far as refusing to invite that parent to important occasions such as birthday celebrations, school events, graduations or weddings. Both parents and children can play a role in this process whereby one parent is alienated. This is discussed in more detail below (see section 3.7.6.2 and 3.7.6.3).

Parents in reconstituted families often experience feelings of guilt (FAMSA 2007:1; LeBey 2005:25-26). Guilt feelings, which arise over having abandoned their own children, often cause step-parents to remain aloof or uninvolved with step-children. Some forms of disloyalty and guilt can even occur in remarriages which follow the death of a spouse. Remarried widows and widowers may find it difficult to enjoy activities, rituals or experiences that they previously enjoyed with their deceased spouse. They may feel disloyal about talking to the new spouse about the deceased spouse. Conversely, they may be inclined to speak too much about the deceased spouse, making it difficult for the new spouse, who may feel guilty for perhaps not ‘measuring up’ in some way to the deceased spouse. It is not uncommon for a divorced spouse to feel protective of an ex-spouse, becoming defensive when the new spouse criticises the ex-spouse. Children also

commonly feel guilty if they perceive themselves as being disloyal to one of their parents or siblings.

Guilt is often used in reconstituted families to manipulate family members to behave in certain ways. LeBey (2005:31-32) explains that guilt works, in either direction, between children and parents. It is effective as a manipulation device because “in both roles there is a feeling that we could and should have done more for the other person”. Children usually know what makes their parents feel guilty and use this sensitivity to get what they want. Parents know their children and they use this knowledge in order to get their children to do what they want them to do. Both parents and children may be aware that they are being manipulated but still allow themselves to be manipulated, perhaps in order to reduce, eliminate or prevent guilt feelings. Manipulators can use a variety of strategies and often keep trying different strategies until they find one which is effective.

Jealousy is often a major challenge in reconstituted families (Le Bey 2005:2-36). New spouses may be jealous of the attention given to step-children. Natural children may feel jealous of the amount of time and attention which their parent gives to the new spouse, step-siblings or siblings born in this new marriage. Step-children, in turn, can be jealous of the relationship which natural children have with their new step-parent. Jealousy often arises between children over material possessions, pocket money and special treats, which is exacerbated by the fact that the financial means of different parents can vary drastically. Ex-spouses’ jealousy of their ex-spouses’ new partners or lifestyles may spur them on to sabotage the new marriage and/or alienate the children from the ex-spouse (see section 3.7.6.2 and 3.7.6.3).

3.7.6.2 Parental alienation and parental alienation syndrome

Parents have been known to attempt to turn children against their other parent after a divorce and/or remarriage occurs. LeBey (2005:45-47) explains that the terms ‘parental alienation’ (defined by Richard Warshak) and ‘parental alienation syndrome’ (coined by psychiatrist, Richard Gardner) are not interchangeable. Parental alienation is described as “witting or unwitting behaviour that causes serious problems in the relationship between the child and the other parent”. One of the parents engages in destructive

behaviour in an attempt to alienate the children from the other parent. The term, 'parental alienation syndrome' includes the children themselves, who have adopted the views of the alienating parent and are now "enlisted in the unjustified and/or exaggerated denigration of the other parent".

Children are, in effect, 'brainwashed' against the other parent. Some behaviours which may indicate the presence of parental alienation or parental alienation syndrome in a reconstituted family include:

- refusing to allow children to speak to their other parent on the telephone;
- trying to influence the children to see the new spouse as their real parent;
- belittling or arguing with the other parent in front of the children;
- destroying or making fun of the mail or gifts which the other parent sends the children;
- refusing visitation rights;
- speaking negatively about the other parent's current spouse;
- neglecting to inform the other parent about children's medical appointments, school plays or other important aspects of the children's lives;
- enlisting the help of other family members to help in the alienation process;
- attempting to change the surname of the children;
- blaming the other parent for the children's problems;
- influencing the children to criticize or denigrate the other parent;
- refusing access to the children's medical or school records; and
- planning other activities for the children during the other parent's visitation times.

3.7.6.3 Divorce-related malicious parent syndrome

Some cases of chronic visitation interference go further than attempts at alienating the child from the other parent. Turkat (1999:95-97), an expert in the area of child visitation interference, coined the phrase "divorce-related malicious parent syndrome". He reports on cases where divorced or divorcing spouses have attempted to get their ex-spouses fired from work; have had them investigated for falsely alleged sexual abuse; have ridiculed them publicly or have physically harmed them. The disorder is characterized by

the parent attempting to punish the ex-spouse in some way; interfering with the ex-spouse's access to the children; and engaging in malicious behaviour directed at the ex-spouse, including lying and even breaking the law. It is rare for these individuals to see themselves as having a problem and they are commonly skilled at manipulating others to join them in their campaign against the other parent and his/her new family.

3.7.6.4 Changes in the father role

Divorce often results in, what LeBey (2005:67-68) refers to as, "fade-out fathers". Fade out fathers can be defined as divorced fathers who become disengaged from their children and "faded out of their lives", with this disengagement becoming more pronounced after remarriage and the starting of a new family. Not all divorced fathers neglect their father role. While some studies show that fathers who remarry are less likely to maintain close contact with their children, other studies show that remarriage often results in the father becoming closer to his children from a previous marriage. Factors possibly responsible for this discrepancy in research results include: the degree of connectedness which existed between the children and the father while the father was with the children's mother; the geographic proximity of the father to his children following the divorce and remarriage; whether the father has had children in his new marriage; the new wife's attitude and behaviour towards her husband's previous family; and negative feelings towards the ex-wife caused by financial obligations to his ex-wife and children (LeBey 2005:67-68; Selzer 1991:79-101). We now examine these factors a little more closely.

One factor not yet recognised in most research studies is the changing role of men in society. Unlike fathers from previous generations, many fathers are more involved with their children, participating in daily child rearing which has become crucial in families where both parents work (Codrington & Grant-Marshall 2004:91-92; LeBey 2005:68-70). While some men have become more involved in their children's lives, many men, whether married or divorced, still regard time when they are not at work as their own and are often unwilling to use this time for activities involving the children. It is, as yet, still unsure whether the current generation of fathers will fade out of their children's lives after divorce. I have noticed in my practice that while some divorced fathers 'fade-out', many

divorced fathers become much more connected to their children because when the children are visiting them, they now take on the responsibilities which were previously left largely to mothers. Fathers, who never previously interacted much with their children, now have to sort out their meals, pacify them, help them with schoolwork, have conversations with them, cope with adolescent moodiness and so much more. This often seems to result in the establishing or deepening of the bond between these fathers and their children.

LeBey (2005:73-74) discusses the startling findings of Dr Kruk, a social worker at the University of British Columbia, who conducted a study of 80 non-custodial fathers. He found that fathers who had been very involved in their children's lives before divorce were those most likely to become disengaged after divorce and remarriage. These fathers seem to battle to accept their new diminished role, experiencing depression, an extreme sense of loss, constant anxiety or a yearning for their children. Fading out becomes their way of coping with the grief of their 'lesser' or newly defined role and they fail to realise the tragic, long-term impact that their withdrawal has on children who need their father's input in their lives. Conversely, Dr Kruk's survey found that fathers who, before divorce, mainly saw to the breadwinning role, with little other interaction with the children, were more likely to develop meaningful, post-divorce relationships with their children. For these fathers, as discussed in the previous paragraph, divorce and remarriage seems to provide the framework for them to become more involved in the lives of their children.

Sometimes a father's withdrawal from his children's lives has less to do with the children and more to do with the anger, bitterness and resentment which he feels towards his ex-wife (LeBey 2005:71-73; Selzer 1991:79-101). It may be easier for such fathers to limit dealings with their ex-wives which may result in them also seeing their children less. Often the children may remind parents of their ex-spouse (for example, in looks or personality) and this may make relations between such parents and their children more difficult.

Sometimes fathers, who remarry after divorce, regard the new marriage as a fresh start and may trade old family responsibilities for new ones (LeBey 2005:74-79). They may be inclined to give gifts or presents to their children as a kind of substitute for their presence

in their children's lives. It can be extremely stressful for children, even adolescents, when they feel they are replaced, in their father's lives, by remarriage and the birth of other children. Some fathers lessen contact with their children in order to please their new wives and they show more concern for their step-children in an attempt to forge relations with them. It is very hurtful for children to experience their father's withdrawal, while witnessing him being a 'model' father to off-spring of a new marriage or to step-children.

Geographic distance is another factor that may make it difficult for non-custodial fathers or parents to stay involved in their children's lives. Fathers who live far from their children and who have very limited financial resources are less likely to maintain contact with their children. Remarriage may mean further constraints on the non-custodial father's time and money. When the ex-wife has remarried, the father may feel replaced by the step-father and fail to realise that he still has an important role to play in his children's lives.

Before divorce, many mothers perform "functions to validate the father's role in the family even if the fathers are largely uninvolved in their children's lives" (LeBey 2005:79-81). After divorce, these mothers are often unwilling to make an effort to encourage and sustain the fathers' connection to the children. This is especially the case if there is much conflict between the mother and her ex-spouse. Once again, this is a factor which may lead to fathers fading out of their children's lives after divorce. It is important to remember that in cases where the mother is the non-custodial parent, much of the above discussion will apply to the mother, with the mother perhaps 'fading out' of her children's lives.

3.7.6.5 Specific challenges which step-mothers may face

Being a step-mother seems to be a particularly challenging role with an unclear 'job description' (LeBey 2005:93-102). The step-mother, unlike the step-father, often has the daily responsibility of caring for the step-children and it is this daily interaction which often "prompts the discord between the child and the step-parent". A list of common traps which may make the step-mothers' task all the more difficult is outlined below

(LeBey 2005:103; Pasley & Moorefield 2004:319-321). This list could also be applicable, to a lesser degree, in the lives of step-fathers. These traps are:

- not knowing enough about their new family;
- expecting the step-children to automatically accept them in their lives;
- expecting themselves to accept, like or love the step-children immediately;
- failing to determine their 'job description' or what is expected of them, such as the child care they are expected to provide for visiting or custodial children;
- competing with the step-children for the father's attention and love;
- becoming resentful when the step-children, extended family or father fail to show appreciation;
- failing to establish clear house rules for step-children in the new home;
- becoming "over-involved or vindictive" as a result of difficulties with their husbands' ex-wife;
- taking it personally when regarded as "an intruder or a scapegoat for the unhappiness due to divorce": and
- always expecting unconditional support from their husbands, who may feel caught between their children and their new wives.

3.7.6.6 The extended family

Extended family, particularly grandparents, may have difficulty coming to terms with divorce and remarriage, especially if they believe that relations with the children (of the first marriage) are in jeopardy (FAMSA 2007:1; Le Bey 2005:123-146). The term 'extended family' would include one's own family members as well as those of one's ex-spouse and one's new spouse. Members of this extended family can often behave in ways which are not supportive or even harmful to the new marriage, often because of the fear that the new marriage may cause valued relationships to diminish or be broken.

The anger, disapproval and/or rejection from these family members and friends may be very challenging, unexpected and painful. Divorce and remarriage creates change in all of the involved relationships and grandparents may experience a strong sense of loss of grandchildren. This sense of loss is often intensified if the family moves a distance away or

if grandparents are no longer requested to help out with the grandchildren. If the son or daughter marries someone who has children from a previous relationship, grandparents have the added challenge of adjusting to being 'instant' step-grandparents. Different family members may have vastly different expectations of the new, reconstituted family. For example, one grandmother may expect grandchildren to express themselves, while another may believe that "children are to be seen and not heard". Getting everyone used to each other can be a very complex task, but one that may help to prevent serious misunderstandings in the future.

3.7.6.7 Family holidays and special occasions

Special occasions and holidays, especially during the early years of a blended-extended family, can give rise to much conflict (LeBey 2005:150-167). Special events and ceremonies such as Christmas, Easter, Passover, graduations, baptisms, weddings, birthday parties and *bar mitzvahs* "reinforce commitments to family, community and shared beliefs. And therein lies their importance - and difficulty - for blended families" (LeBey 2005:151). Rituals and how different families celebrate can cause conflict. Often occasions (such as birthdays, weddings or graduations) which are meant to be happy, can be marred as a result of conflict within the extended family. Scheduling 'who spends what time with who' can be a major challenge during holiday season for the blended family.

3.7.6.8 Financial issues

Disputes and conflict over financial issues can be a major challenge in reconstituted families (FAMSA 2007:1; Pasley & Moorefield 2004:319-324). LeBey (2005:171-200) stresses this challenge, stating, "When two families are trying to blend into one, the emotions of love, guilt, anger, and deprivation often find expression through the uses and abuses of money".

Some main causes of financial discord in blended families include:

- men who believe they have been 'wiped out' financially by their ex-wives and who are reluctant to allow their present wife to know all the financial details;

- a reduced standard of living as a result of alimony and child support obligations;
- a father whose guilt feelings cause him to believe he owes his ex-wife and their children more than he can afford;
- either or both wives has money of their own (such as inherited money) which they refuse to use to meet family financial obligations, while the husband has to struggle to meet these obligations on his own;
- grandparents of one set of children, who are well-off financially, shower these grandchildren with gifts, while the other children in the blended family do not enjoy this privilege;
- a wealthy father provides lavish gifts and treats, leaving the step-father feeling devalued and powerless, perhaps 'taking out' his feelings of insecurity on his wife and step-children;
- the new wife feels like an intruder when she moves into the house formerly shared by her new husband and his ex-wife, especially if financial constraints prevent her from redecorating or changing the house to suit her own personal style;
- the remarried mother continues to live in the house which she lived in with her ex-husband and the new husband feels embarrassed to rely on the charity of his wife's ex-husband, also being reluctant to spend money on a house which does not belong to him;
- fathers who do not pay their alimony or child support, putting financial pressure on the blended family which has to carry the full 'financial load';
- inheritance after someone's death can cause much hurt, jealousy and anguish in the blended family;
- determining who is responsible for different expenses such as medical or educational expenses especially when the needs of different family members differs;
- the husband and wife have separate bank accounts, keeping their financial matters completely separate, which hampers the blending process and the development of a sense of family unity and trust; and the
- the ex-wife lives extravagantly as a result of the alimony and child support which she receives, while the new wife and blended family have to be thrifty and miss out on treats or luxuries in order to meet financial obligations.

3.7.6.9 Sensitive issues

Many sensitive family issues may arise in the blended family, especially if these blended families include adolescents (LeBey 2005:203-230). One of the most difficult issues is sexuality in all its forms, “from the ex-wife’s new boyfriend to the ex-husband’s live-in girlfriend, to the stepson’s attraction to his sexy young step-mother, to the hunk that is now sharing a bathroom with his step-sister”. In blended families there is an increased risk of sexual attraction between step-relations which may lead to harmful, inappropriate behaviour.

When there is one child (or adult) that is having a bad influence on the others, for example by engaging in anti-social behaviour, it can become a complicated task to deal with the issue without creating conflict between the step-parents and the biological parents (LeBey 2005:219; Pasley & Moorefield 2004:319-324). Alcoholism, drug abuse, criminal activity and mental illness are some of the issues that may confront a parent who sees their child “being exposed to these untenable situations in a home where he/she lives or visits” (LeBey 2005:215-220). This type of problem is difficult to handle in traditional households but even more difficult in blended families. Related to this is the other sensitive issue of discipline including ‘who disciplines whose children and how are they to be disciplined’.

Death in a blended family also gives rise to a number of difficulties, especially if a child loses a biological parent and more so if it is the custodial parent (LeBey 2005:232-244). While the day-to-day life of the child is not that disrupted by the death of a non-custodial parent, the grief and loss may be just as intense. When a surviving parent marries after the death of the other parent, the child begins life in the new family with “a recent history of profound loss and change beyond their control”. This can result in major behaviour and adjustment difficulties.

3.8 CONCLUSION

The above literature study highlights the important aspects of the parenting role, making it clear that parenting adolescents is a complex, challenging and significant life task. The parenting role involves meeting the needs of adolescent offspring; adopting an effective parenting style; coming to terms with personal characteristics and circumstances which may affect parenting; coping with the many challenges involved in parenting adolescents; and parenting effectively in a society in which changes in family and/or social structure and functioning result in more challenges and increased stress on parents.

In the next chapter, the research design will be explained.

CHAPTER 4

RESEARCH DESIGN

4.1 INTRODUCTION

In this chapter a report is given of the research design that was used in the empirical phase of this study. This phase refers to active attempts to enter the field of parenting and answer the main research question, namely, “How can the efficacy of parents of adolescents be enhanced?” This chapter gives an account of research methods adopted, which include ethical measures, measures to ensure trustworthiness (validity and reliability), data collection methods and data processing methods. The importance of research is highlighted by Chadwick, Bahr and Albrecht (in Knott 1998:105), who state, “There are many reasons for doing research: the most important is that social research has the potential to improve the quality of human life”. As can be seen from the research question, the main purpose of this study has been to attempt to improve the efficacy of parents of adolescents by means of a psycho-educational programme and, in so doing, assist them in their task of guiding adolescent children through their adolescent years, helping them to overcome challenges, to develop optimally and to prepare them for their adult roles and responsibilities. This should be beneficial to parents, adolescents, the communities in which they live and society in general.

4.2 RESEARCH APPROACH AND DESIGN

A qualitative research design was adopted for this study, which means that the research was aimed at gaining an understanding of a social phenomenon, in this case parenting of adolescents, from the participants’ perspective (McMillan & Schumacher 1993:373). This design involves an interpretive perspective. Terre Blanche, Kelly and Durheim (2006: 273-274) explain that an “interpretive paradigm involves taking people’s subjective experiences seriously as the essence of what is real for them (ontology), making sense of people’s experiences by interacting with them and listening carefully to what they tell us

(epistemology), and making use of qualitative research techniques to collect and analyse information (methodology)".

Evaluation research, which can be defined as "the determination of the worth of an educational program, product, procedure, or objective" (McMillan & Schumacher 2006: 439), was used in this study. It can be defined as *formative evaluation research* as it was used to improve a programme in a developmental stage (McMillan & Schumacher 2006: 440). This design called for interactive field research, which involved face-to-face interactions between the researcher and selected parents of adolescents, enabling the parenting experience of these parents (their individual and social beliefs, perceptions, thoughts and actions) to be explored, examined, described and analysed. Data collected were in the form of words or narratives, that is, quotations from transcripts of focus groups.

Qualitative research is concerned with the investigation of small, distinct groups (McMillan & Schumacher 1993:375) and aims to generate information which is useful in certain contexts (Kelly 2006:287), rather than information which can be generalised to the whole population (McMillan & Schumacher 1993:373). In this study, the aim was to generate information which would be useful to selected groups of parents of adolescents living in the George area of South Africa.

Sherrard (1998:254) conducted a qualitative study to determine strategies for well-being in later life. The aim of the study was to determine *possible* strategies rather than most frequently used strategies. Likewise, in the present study, the aim was to identify possible strategies to enhance efficacy of parents of adolescents. It was not aimed at determining the most common strategies or those applicable to all or most parents of adolescents. The research discovered possible strategies and an attempt was made to find strategies which could possibly be applicable to the particular parent group (as a whole), sub-groups (i.e., parents with different family structures) and individual parents participating in the research (see section 6.2.3.1).

This qualitative study had an emergent design, meaning that the research design was flexible, unique and continued to evolve throughout the research process (with each new

research decision dependent on prior information). The emergent nature of the design meant that the research did not involve pre-planned, sequential, fixed steps, which could be followed (Schurink 1998:243). Bogden and Biklen (in McMillan & Schumacher 1993:374) describe the emergent design as appearing to be of a circular nature, with processes of sampling, data collection and partial data analysis being “simultaneous and interactive rather than discrete sequential steps”.

The research began with a literature study on adolescence and on parenting of adolescents. At the same time, a pilot study was conducted, involving informal interviews with parents of adolescents; my work (within the context of an educational psychology practice) with adolescents and their parents; personal experience with my own adolescents and examination of parenting programmes. A psycho-educational programme to enhance the efficacy of parents of adolescents (see Appendix D) was designed and presented to a group of parents of adolescents. This group consisted of three main sub-groups of parents (see section 4.4.3.1 for a description of these groups).

The programme consisted of six sessions and was run over a six week period, with one session being conducted per week. In each session, time was allocated for parents to highlight challenges or difficulties in their parenting role, reflect on topics covered in previous sessions and to comment on aspects which they found to be helpful or beneficial and aspects which they found to be ineffective or less helpful. Observations and informal analysis of parents' comments in one session often led to changes in the programme content and/or the approach adopted in subsequent sessions. Thus, an action research approach was used. It also meant that the programme was customised for the particular parents in the research group (see section 6.2.3.1).

After completion of the whole programme, focus groups were held with each of the three sub-groups of parents (see section 4.6.1 for a description of these groups). Participants were requested to contact me if they had anything to add to the focus group discussions. Field notes were kept, which included my observations during the presentation of the programme, observations of the focus groups, as well as participants' comments made in programme sessions and prior to or after focus groups.

4.3 ETHICAL MEASURES

A discussion of the ethical measures undertaken which served as guiding principles throughout the empirical investigation is as follows:

4.3.1 Informed consent

In this study, I undertook to obtain informed consent from all participants, by means of a dialogue, during which each participant was informed of the purpose of the study and assured of confidentiality and anonymity (Henning et al 2004:73; McMillan & Schumacher 2006:334). Informed consent ensures that participants are provided with adequate information regarding:

- the goals of the investigation;
- the procedures to be followed during the research;
- the possible advantages and disadvantages of participating in the investigation; and
- my credibility as researcher.

Furthermore, I had to ensure that participants were psychologically competent to give their consent and to make participants aware that they were free to withdraw from the programme and investigation at any time. By providing potential participants with accurate and complete information about the study, they were able to understand the purposes, procedures, methods, risks and benefits of the research (Wassenaar 2006:72). As a result, they were able to make voluntary, informed and carefully considered decisions concerning their participation.

4.3.2 Anonymity and confidentiality

Participants were assured of anonymity and confidentiality. Settings (e.g., schools) and participants would not be identifiable in print. The common practice employed by researchers, namely, the use of code names for people and places (McMillan & Schumacher 2006:334), was employed in this study to ensure anonymity. Participants

were also requested to sign a written statement declaring that they would maintain the confidentiality of discussions held during programme sessions as well as focus group discussions (see Appendix B).

4.3.3 Deception and privacy

I undertook to avoid deception through obtaining informed consent and through protecting the privacy of participants. The taping of focus groups never proceeded without the knowledge and consent of participants. Participants were assured that they had the right to refuse to respond to certain questions and to decide what information they were/were not prepared to disclose.

4.3.4 Competence of the researcher

I recognised the importance of ensuring that this research was conducted in a competent manner. In order to do this, I undertook, as proposed by Strydom (2005:63-64):

- to accept the ethical responsibility to ensure that I was competent and adequately skilled to undertake this empirical investigation;
- to remain sensitive to the needs of the parent participants in this study; and
- to maintain objectivity and refrain from making value judgments about the values and points of view of participants, even if they contrasted sharply with my own.

4.4 MEASURES TO ENSURE TRUSTWORTHINESS

Whereas the verifiability of quantitative research is assessed in terms of its reliability and validity, qualitative research is perhaps more accurately assessed according to its trustworthiness (De Vos 2005:345). In this study, Lincoln and Guba's model for ensuring the trustworthiness of qualitative data was employed (De Vos 2005:346).

In accordance with this model, four criteria were used to ensure trustworthiness. The criteria employed are described below (see sections 4.4.1 – 4.4.4).

4.4.1 Truth value

Truth value determines how confident the researcher is that the findings are true for the particular subjects and context within which the study has been undertaken. According to Lincoln and Guba (De Vos 2005:346), truth value, which can also be termed credibility, is the alternative to internal validity. They argue that internal validity, which is based on the idea that there is a single reality to be measured, should be replaced with the idea that there are multiple realities which the researcher needs to represent as accurately as possible.

4.4.2 Applicability

Applicability refers to the extent to which the findings apply to other contexts, settings and groups. In qualitative research, the purpose is not to generalise findings to a larger population, but rather to describe a phenomenon or experience. According to Lincoln and Guba (De Vos 2005:346), applicability (referred to as transferability), in qualitative research is the alternative to external validity or generalisability, which can be defined as the extent to which findings can 'fit' into similar contexts outside the present study. Responsibility for the strategy of transferability (i.e., the task of demonstrating the applicability of findings to other contexts) lies with those wanting to transfer findings to other situations, rather than with the original researcher. In this study, I addressed the problem of applicability by presenting sufficient descriptive data to allow for comparison in future research using similar contexts, settings or groups.

4.4.3 Consistency

Consistency, which is the alternative to reliability, refers to the extent to which the findings would be consistent if the study were repeated in similar contexts or with the same subjects. To ensure consistency, I used the Lincoln and Guba's strategy of dependability (De Vos 2005:346-347). This encompassed accounting for the variables which could result in changes in the experience or phenomenon of parenting of

adolescents as well as for changes, characteristic of an emergent design, which occurred as a result of an increasingly deeper understanding of the study setting.

4.4.4 Neutrality

Neutrality refers to the freedom from bias in research procedures and results. In this study, I attempted to remain as objective as possible, guarding against subjective values, perspectives and biases, which could influence the interpretation and description of data. The strategy of conformability was employed to ensure neutrality (Lincoln & Guba in De Vos 2005:347), which placed the evaluation on the actual data and focussed on whether the results of the research (i.e., raw data and my analyses and interpretations) could be confirmed by others (e.g., participants and the promoter of this study).

4.4.5 Tactics to ensure trustworthiness

A list of tactics proposed by Schulze and Lessing (2002:5) and employed in this study to implement all four strategies of trustworthiness, thereby ensuring trustworthiness of data (i.e., data met the four criteria discussed above) and avoiding biases included:

- triangulation of methods (e.g., pilot study interviews, programme sessions and focus groups) and the comparison of empirical findings to other research findings studied in the literature phase of this study;
- asking other parents if they could identify with, or recognise the experience of parenting adolescents, as described by participants in focus groups. The study is regarded as credible if these people immediately recognised and/or identified with, the given descriptions and interpretations;
- using a tape recorder and making verbatim transcriptions of each focus group interview (see Appendix F - for a transcript of one focus group interview);
- obtaining feedback from participants when unsure about the meaning of statements;
- circulating findings to participants to confirm that their views were correctly reflected;
- making sampling decisions carefully; and

- having the supervisor check the analysis of data to ensure that she agrees with interpretations made and meanings given to raw data.

4.5 DATA COLLECTION

The emergent design of this study made it circular in nature, with the processes of purposeful sampling, data collection and partial analysis being simultaneous and interactive, rather than occurring in discrete sequential steps (McMillan & Schumacher 1993:374).

4.5.1 Sampling

Purposive sampling was used in this study, which means that information-rich participants (i.e., parents of adolescents with depth and breadth of experience, who shared certain commonalities) were selected for in-depth study (Strydom & Delpont 2005:328-329). In order to narrow the study down and make a more in-depth study possible, it was decided that the sample would be chosen from the population of parents of adolescents attending the two largest English medium secondary schools in the George area of South Africa.

It was decided to divide the sample into sub-groups or focus groups in order to differentiate between the main variable observed in the chosen population of parents (as revealed during the pilot study). Since homogeneity is the key principle to be adhered to when forming focus groups (Kingry, Tiedje & Friedman in Schulze & Lessing 2002:3), the aim was to form focus groups that were homogenous regarding the variable considered to be most important, namely family structure or type. The reason that this variable was chosen was because family structure seems to have an influence on adolescent challenges, parenting challenges, how these challenges are handled, relationships within families (including parent-child relationships, sibling relationships and relationships with the extended family such as grandparents), and the amount and type of parental support available. The following three focus groups were chosen:

- parents of adolescents who are part of a nuclear family, which refers to a family consisting of a father, mother and their own offspring;
- parents of adolescents who are part of a single-parent family, which refers to a family in which only one parent, either the mother or the father, lives with and cares for the children (Kleist 1999:373); and
- parents of adolescents who are part of a blended-extended or reconstructed family, which refers to a family in “which one parent is not the biological parent of at least one child” (LeBey 2005:1).

A letter was sent out to the high schools (see Appendix A), explaining my research project and inviting parents to apply or register for the parenting programme. All parents who applied were selected. Some parents joined the programme at a later stage, after hearing reports from parents on the programme.

4.5.2 The researcher as instrument

In this study, I, the researcher served as an instrument, in that responses given by participants were analysed by me. In order to prevent interpretations being influenced by my own prior understandings (whether theoretical or everyday), two measures employed by Sherrard (1998:253) to counter such biases, were used. Firstly, close attention was given to the participants’ own words. Secondly, such biases were countered by maintaining an awareness of where I was situated according to relevant dimensions of the participants’ life-worlds (Sherrard 1998:253). For this study, I perceived myself to be close to the participants in terms of social class and culture, age and stage in working life. Moreover, I am currently the parent of two adolescent children. While I am closer to those parents in the nuclear family focus group (in terms of my parenting experiences), I am distanced in some respects (such as the nature of parental challenges and support) from those in the single-parent family focus group and the extended-blended or reconstructed family focus group.

Sherrard (1998:254) argues that awareness of researcher–respondent distance serves as a strength of qualitative research, rather than simply as a means of countering bias. She

explains that perceptiveness is increased by finding the “dimensions of researcher-responder difference and similarity which have consequences for the life-world and experience of each”.

In order to ensure that I was a skilled and competent researcher, I studied relevant publications and parenting programmes and attended a number of parenting talks and programmes. I also consulted with my promoter, concerning the use of pilot studies, programmes, focus groups and other qualitative research techniques (e.g., field notes) in planning for my empirical research. My promoter was consulted throughout the research to ensure that correct research procedures were adhered to both in the collection and analysis of data.

4.5.3 Methods

Methods used included:

- *Pilot study*

A pilot study was conducted, consisting of informal interviews with parents of adolescents as well as my work in my practice with adolescents and their parents. An examination was also made of various parenting programmes and the researcher also attended parenting workshops, talks and programmes. The pilot study proved valuable in:

- identifying the variables used to choose the different focus groups;
- the designing of the parenting programme; and
- the drawing up of the interview guide (for interviews regarding each session as well as focus group interview held after the completion of the programme).

- *Programme design and implementation*

Using the theoretical framework as presented in Chapter Two (which provides an understanding of the developmental phase of adolescence) and Chapter Three (which

focuses on the phenomenon of parenting) as well as the pilot study (see description above), a parenting programme was designed (see Appendix D).

The content for the programme was based on the sources mentioned in Chapter Two and Chapter Three as well as additional information from the following sources: Berndt (2002); Blau (1993); Campbell (2000); Carr-Gregg (2005); Chapman (1995); Cherry (2006); Cloud and Townsend (1998); Codrington and Grant-Marshall (2004); Damico (1997); Elias et al (2000); Emery (2004); Ezzo and Buchnam (2000); Faber and Mazlish (2001); FAMSA (2007); Gage (1999); Galinsky (2000); Gordon (2000); Gouaux (2004); Harley (2003); Hersh (2001); Hersh (2004); Jernberg and Booth (1999); Jones et al (2000); Kacir and Gordon (1999); Keating (2004); Kleist (1999); Kohn (2000); LeBey (2005); MacKenzie and Hilgedick (1999); Mansager and Volk (2004); Peterson (2006); Renshaw (2005); Rice (2006); Rosberg and Rosberg (2002); Schwartz and Cappello (2000); Searll (2002); Smalley and Smalley (2003); Smith (2003); Speedie and Bauling (2002); Swartz, De La Rey and Duncan (2004); Townsend (2006); Van Niekerk (1990); Veerman (2006); Worth and Tufnell (2001).

This programme was designed with the main goal being to enhance the efficacy of parents of adolescents. A basic framework consisting of six sessions was designed and a Powerpoint presentation was made to be used as a basis for each session. The researcher changed and adapted the programme and Powerpoint presentation as the programme presentation progressed (using participants' expectations, comments and researcher observations) in an attempt to improve the programme and to make it progressively more effective as a tool to enhance the efficacy of this particular group of parents. Thus, an action research approach was used. Participants were given notes (printed copies of the Powerpoint presentation - see Appendix E) and which included an application (or homework task) after each session.

- *Focus groups*

I decided to conduct three focus groups. I chose this method because it was less time consuming than conducting numerous individual interviews; group dynamics have been shown to elicit information (Carey in Schulze & Lessing 2002:3); and participants have

been shown to be more confident in expressing their true feelings within a group, which provides the support of peers, than in individual interviews (Folch-Lyon & Trost in Schulze & Lessing 2002:3).

An *interview guide* (see Appendix C) was designed, which encouraged participants to evaluate the programme. The following questions were posed, namely:

- What was most useful?
- What was least useful?
- What do you think of the programme implementation? (What worked? What didn't work? What did you like/dislike?)
- What have you implemented? (What have you tried at home and what was the result?)
- Any other comments: What should have been added or what should have been left out of the programme?

In the guide, I listed a number of the main themes/issues likely to emerge in the discussion of each of the above questions. These possible themes were identified during the literature study phase (see Chapter 2 and 3) and during the pilot study. During the focus groups, however, the natural flow of conversation was followed and the themes were used as prompts (when necessary) to explore fully meanings and experiences of participants. After previous focus groups, additional themes or points for consideration were added to the interview guide for subsequent focus groups.

At the beginning of sessions two to five, each group was given an opportunity to evaluate the previous session (discussing the questions as posed in the interview guide). A member from each group then reported back to the whole group of parents and these reports were recorded and transcribed. Information gleaned from these sessions was used to adapt and improve future sessions.

A date for final interviews was scheduled at a convenient time and place which was easily accessible and suitably quiet. Refreshments were on offer for each group which served to facilitate a positive atmosphere and demonstrated my gratitude for the

willingness of parents to participate in this study. I also began each session by expressing my gratitude for participants' presence, reminding them of what the purpose and aims of the research were, assuring participants of confidentiality and anonymity, reminding participants to maintain confidentiality of sessions (as indicated by the signing of relevant forms at the start of the programme– see Appendix B) and obtaining permission to record the discussion on audio tape. Each final focus group interview lasted approximately 60 minutes. At the end of the session, participants were invited to present any additional information which they still wished to contribute.

- *Field notes*

Field notes were kept throughout the empirical phase of the research. These notes consisted of:

- researcher observations during the pilot study, programme presentation and final focus groups;
- information gleaned during the pilot study;
- participants' comments during the programme and prior to or after focus groups; and
- tentative interpretations made by the researcher during the data collection and analysis procedures.

4.6 DATA PROCESSING

Interim analysis was employed, which refers to the cyclical process whereby data is collected, then analysed, additional data is collected, which is also then analysed, throughout the investigation (Miles & Huberman in Johnson & Christensen 2000:425). Memoing, which refers to reflective notes which researchers write, recording ideas generated during data analysis (Johnson & Christensen 2000:425-426), was also used. All focus groups and individual interviews were transcribed (i.e., recordings were transformed verbatim into typed text) before data was analysed.

Initially the data were divided into three broad categories, namely, aspects of the programme (content, skills and course presentation) which proved to be effective in enhancing the efficacy of parents of adolescents; the challenges or difficulties which participants experienced in applying the knowledge and skills presented in the programme and enhancing their efficacy as parents of adolescents; and recommendations to change or improve the programme so that it could become a more effective tool in helping parents of adolescents to enhance their efficacy. Within these three broad categories, a bottom-up strategy was adopted, which involved beginning with the lowest level categories closest to the data in the following way (Johnson & Christensen 2000:426-431):

- *Segmenting*

Segmenting involved dividing the data into meaningful analytical units. I did this by carefully reading the transcribed data, one line at a time, and asking myself: Is there a segment of text which is important for this research? Does it differ in any way from the text which precedes or follows it? Where does the segment begin and end? Such segments (words, sentences or several sentences) were bracketed in order to indicate where they began and ended.

- *Coding*

The identified segments of data were identified by means of category names and symbols. For example, *communication* was indicated by C; *emotional needs* by EN; and *conflict management* by CM.

In addition to these, facesheet codes, which applied to single complete transcripts, were given to enable me to search for group differences. For example groups one, two, and three were G1, G2, and G3 respectively.

- *Compiling a master list*

All the category names developed, together with their symbolic codes, were placed on a master list. The codes on the master list were reapplied to new sections of text every time appropriate sections were discovered. New categories and codes were added to the master list as the need arose.

- *Checking for intercoder and intracoder reliability*

In order to address intercoder reliability I checked for consistency in the appropriate codes between myself and my supervisor. My supervisor also checked my analysis for intracoder reliability (i.e. to ensure that my own coding was consistent).

- *Enumeration*

The frequency with which observations were made was noted in order to help me to identify important ideas and prominent themes, occurring in the research group as a whole, or between different subgroups.

- *Showing relationships among categories*

Spradley's (in Johnson & Christensen 2000:437) summary of nine possible relationships was used to identify relationships between categories. Examples included:

- Cause-effect (X is a result/cause of Y)
- Rationale (X is a reason for doing Y)
- Means-end (X is a way to do Y)

4.7 SUMMARY

In this chapter a report has been given on the empirical phase of this study. This included a description of the basic research design, an account of ethical measures and measures to ensure trustworthiness and a description of data collection and data processing methods. In the next chapter, the findings of this empirical investigation will be reported.

CHAPTER 5

RESEARCH FINDINGS

5.1 INTRODUCTION

In this chapter an account is provided of the findings of the empirical investigation. The chapter begins with a discussion on the composition of the research sample, providing a description of the three focus groups that were involved in the investigation. The research results, although consisting mainly of findings from the focus groups, also include findings from the pilot study conducted prior to the presentation of the programme as well as from field notes recorded throughout the investigation.

5.2 COMPOSITION OF FOCUS GROUPS

There were 21 participants in total, with the female participants (n=16) enjoying a much larger representation than the male participants (n=5) in the total sample as well as within each of the three focus groups. A description of the composition of the three selected focus groups follows:

5.2.1 Focus group one

This group consisted of participants who were *single parents*. This group was comprised of six participants (n=6) of which five were female and one was male. Two of the participants had been widowed and three were divorced. The remaining participant was a female (whose children were grown up), who heard about the parenting programme after it had already commenced and requested to join the research group as she worked with adolescents (acting in certain ways as a surrogate single mother to some of these adolescents). She began participation from the second session onwards. The male participant was a widower and he had four children, two daughters (aged 13 and nine

respectively) and two sons (aged 11 and seven respectively). The widow had two daughters (aged 15 and 14 respectively) and a son (aged 10). The three female, divorced participants each had two sons. The ages of these three pairs of siblings were 13 and 10, 13 and nine and 16 and 10 respectively. All of the participants were living in George or the surrounding area and their adolescent children were attending local, English medium secondary schools.

5.2.2 Focus group two

This group consisted of *parents of nuclear families*. The group consisted of eight participants (n=8) of which six were female and two were male. There were two married couples in the group, one couple being parents to a daughter (aged 14) and the other couple being parents to two sons (aged 15 and 12 respectively) and a daughter (aged seven). One female participant, who had five children (three sons, aged 16, 14 and 12 respectively and twin daughters aged 10), had a husband who worked overseas for extended periods of time and who attended one of the sessions of the parenting programme. Two of the other female participants (who attended the programme without their husbands) each had two children. The one had a daughter of 14 and a son of 13 and the other had a son of 16 and a daughter of 12. The one remaining female participant (who also attended the course without her husband) was the parent of three sons (aged 13, 11 and nine respectively). All participants lived in George or the surrounding area and their adolescent children attended local, English medium secondary schools.

5.2.3 Focus group three

This group consisted of participants who were *parents of blended-extended families* (from now on to be referred to as *blended families*). This group consisted of seven participants (n=7) of which two were male and five were female. There were two married couples in this group, one couple being parents and/ or step-parents to two daughters (aged 14 and 13 respectively) and two sons (each aged 11). The other couple were parents and/or step-parents to three sons (aged 14, nine and five respectively). One female participant (who attended the course without her husband) was mother and/or

step-mother to three sons (aged 18, 14 and four respectively). The two other female participants were part of a blended family set up in which there were two young children (who were the children of the one participant) and one girl of 14 years (who was the sister of the other participant). All of the participants lived in George or the surrounding area and their adolescent children attended local, English medium secondary schools.

5.3 FINDINGS

The findings have been discussed under three broad categories, namely the aspects of the programme (content, skills and course presentation) which proved to be effective in enhancing the efficacy of parents of adolescents; the challenges or difficulties which participants experienced in applying the knowledge and skills presented in the programme and enhancing their efficacy as parents of adolescents; and recommendations to change or improve the programme so that it could become a more effective tool in helping parents of adolescents to enhance their efficacy. (Some quotes are translated from Afrikaans.)

5.3.1 Effective aspects of the programme

5.3.1.1 Information which promotes understanding of the adolescent life phase

The participants believed that the information or theory presented in the programme helped them to parent more effectively. They noted that it was necessary to have information on adolescence (based on the theoretical framework presented in Chapter Two) to promote understanding of their adolescent offspring. As one participant explained, "For me the course was very, very informative. There are lots of things that lie dormant there with the teenager. You come in almost like a refresher course and throw things at us and suddenly things are highlighted again. It was so helpful!"

Parents often reported feeling out of touch with their adolescents as they could not clearly remember their own struggles through the transition period of adolescence or what they did remember caused them to become over protective or to emulate

ineffective styles used by their own parents (as reported in the literature study - see section 3.6.1). As one parent stated, "You have to have all that information on the teenager...you have to understand where they are coming from...we are not psychologists so we don't know the theory or story behind why and what they are doing...it helps us, as the programme is presented, to understand - so that's the reason why we have the four pillars [structure, engagement, nurture, challenge] and so on. Like she said, you forget what it was like to be a teenager. It was a few years ago you know!"

They valued having information on the developmental changes which characterise adolescence and the resultant psychological or behavioural effects of these developmental changes (see sections 2.2 - 2.5). One participant remarked, "We enjoyed the theory - it's good to get the facts and know it isn't just a generalisation that our teenagers are sleeping so much or are grumpy and emotional - there are actual medical, logical reasons behind their behaviour". Participants valued information on the following aspects of adolescent development:

- *Physical development*

Parents found that information on the physical and hormonal changes of puberty (see section 2.2.1) helped them to be able to understand and support adolescents who were struggling as a result of physical changes. Some such difficulties mentioned by participants include difficulties which arise as a result of early or late maturation; self-consciousness; changes in sleep patterns; the development of a sexual identity and moodiness. Here follows a relevant parent comment on each of these:

Shame, he has always been the smallest. His dad and I are not exactly big. In grade seven the other boys just shot up and he got left behind. He has been called 'shrimp' and 'squirt'. These kids of ours have a lot to deal with!

She never feels happy with the way she looks. It takes hours and sometimes tears and tantrums before she is finally dressed and ready to go to movies. Some days, at the last minute she's not going.

My husband (who is step-father to my daughter) complains that when she comes home on weekends she just sleeps and lazes about. It drives him insane. This information helps him see its normal for my daughter to behave this way!

She thinks she's ugly because as she says, "Mommy, boys don't even notice me, I'm the only one of my friends who has never had a boyfriend".

It's good to know there is a source or reason for all this moodiness! Now I understand why boys are so much easier! Our girls are so moody and they kind of back each other up.

- *Cognitive and moral development*

Participants mentioned that they could cope better with critical, egocentric adolescents when they understood the adolescent cognitive development (and changes in the brain and thinking patterns) which possibly cause or contribute to this behaviour (see section 2.3). It seems that simple awareness of this development softened the parental approach. As one participant stated: "Teenagers can be very, very egocentric – it's all about them. It doesn't matter about anybody else in the home, it's all about them". I feel better now that I know why my teen is so selfish".

Another was able to cope better with the fact that her daughters are so critical and argumentative. She said, "Now I know why they always have to have the last word". One parent explained that she sometimes felt like a punch bag (as a result of her adolescents' critical attitude towards her) and that she sometimes felt like a vending machine (as a result of her adolescents' demanding, egocentric attitude). She said, "It's like when they don't get exactly what they want, they kick the machine a little harder to make it spit out what they are demanding". This understanding also seemed to motivate parents to speak up about their own feelings and communicate more effectively with their adolescents after identifying problem ownership (see section 5.3.1.4). As the above-mentioned parent went on to explain, "My kids were shocked when I mentioned the punch bag and vending machine idea. It was like, 'Who, us? Never! Can't be! – but they

are definitely more aware that I'm actually a person with feelings. They kind of get what I'm saying".

Participants recognised the link between cognitive development and moral reasoning (see section 2.4.3) and were able to understand how this affected adolescents' behaviour. They noted how adolescents capable of abstract thinking, were able to see moral issues more broadly, while those whose thinking was more concrete, still held onto narrower personal beliefs. As one participant said, "My daughter seems to be becoming less judgmental and capable of seeing the view points of others". Another commented: "My son is still so opinionated and argumentative – this sometimes makes him very idealistic and he almost looks down on those who think differently".

- *Psycho-social development*

Information on psycho-social development (see section 2.5) helped participants to understand developmental changes and life tasks, especially identity formation (see section 2.5.2) and the effects of this on adolescent behaviour. Parents became aware that there are things they can do and avoid doing if they are to facilitate the identification process (see section 5.3.1.4). Relevant participant quotes include:

My daughter has been fretting about what she should do next year (she's in matric at the moment). She can't decide whether to have a gap year or start studying immediately. I realised that my husband and I need to sit down and help her with this. We were so scared not to influence her but the other day she said, "A little help would be nice you know".

We started being less autocratic. This new parenting approach is the only way our kids are going to grow up and take responsibility for themselves.

Parents valued information on common emotional problems of adolescence (see section 3.6.8). This information made them aware of how to ascertain whether their adolescents were experiencing emotional difficulties. They became better equipped to identify early warning signs (e.g., eating disorders or depression); to know how to handle these issues

more effectively and to know when to seek outside help. As one participant said, “I feel better now that I know the warning signs of drug abuse ... or if your kid is in danger of committing suicide. It still scares me silly though”.

- *Common parental challenges*

Participants valued information on common parenting challenges (see section 3.6) arising mainly from each of the above developmental changes. Some aspects raised by participants include: the importance of friends; peer pressure; the need for privacy; fashions and fads (including music styles) and emotional or behavioural problems to name a few. Some examples of participant comments include:

Teens don't seem to want to be with their parents ... they'd rather be with their friends than with their parent at any cost ... they don't just want to visit, they want to *live* with one another. It's good to know that it's not just us – most parents get that rejected feeling.

It made me realise that you have to have something that helps you connect with your teenager. Like my children's music. I hate their music but a while ago we drove to Cape Town and I said you can play your music and I listened to their music full volume for four hours. They actually appreciated it so much that I listened to their music.

I was glad to hear it is normal for them to hibernate in their rooms behind closed doors.

My son seems so shy and I do need to watch that he doesn't withdraw into virtual reality or get depressed. Sometimes he seems so down. It's good to know the warning signs.

This information on common adolescent development challenges or issues thus helped parents to understand the reasons underlying adolescent behaviour. This, and the fact that they came to see such behaviour as 'normal' or to be expected, helped them to be

more accepting of their adolescent offspring, making it easier for them to respond and parent in more effective ways. It also motivated them to try out parenting skills presented on the programme.

5.3.1.2 Information which promotes understanding of parents of adolescents

Some participants found it reassuring to know that many parents find parenting adolescents challenging (see section 3.6). The fact that parents' midlife transition phase coincides with the adolescents' transition phase can compound these difficulties (see section 3.5.1). One participant said, "It kind of reassured our relationship with them – they are not losing it and we are not losing it – it's just a natural process". Once again, the parents were encouraged by this information as it promotes understanding of both the adolescent and the parents' life phase and makes them realise that their parenting responses and challenges, like that of the adolescents (see section 5.3.1.1) are 'normal' and universal. This encourages them to persevere in the face of challenges rather than to give up in despair.

5.3.1.3 Generational theory

Many participants found that the information on generational theory (see section 3.5.3) promoted their understanding of their adolescents' behaviour and helped them to understand that the way they were parented affects the way they, in turn, parent their children. This understanding sometimes prompted them to re-examine and change their ways of parenting in an attempt to parent more effectively. Some examples include:

Our group really enjoyed the generational aspects of parenting ... It's true - what often happens is that when you are a parent, you over-compensate for the stuff that you didn't get when you were a child and a lot of that stuff came out - so the course stimulated things that I did not think could be stimulated – which was nice because you scratched nice and deeply last week ... and I became aware of why I parent the way I do and of what I need to change.

As parents of today, we really appreciate all the input we can get because, I think we all agree, the kids of today are far too advanced for us. Now I can understand what my mother and father went through when I was this age! I'm aware of this terrible age gap ... which, if we are not careful, can divide different generations and make relationships between them difficult.

The inclusion of generational theory in parenting programmes can play a role in promoting understanding between parents and their adolescent children and in bridging the generation gap (the strong divide or lack of understanding between members of different generations). It could thus help generations to work together more effectively and have a positive impact on society.

5.3.1.4 Information on the parenting role

Participants mentioned how information presented on the programme provided general guidelines for effective parenting. Examples include:

You've helped us to see that there are no sure [perfect] ways of parenting. There are so many different facets that influence it. What you've given us is something to work with ... that we can base how we bring up our children on – where before we had nothing!

I think your research has been very thorough ... you've touched on a little bit of everything. I don't think you need to put in more – it would be too much and I don't think you need take anything out. I think the information for this particular course is 100 percent!

The programme made participants aware that parenting is a complex process, with no foolproof or perfect ways of parenting. They became aware that a basic framework was very useful. This could be used to develop ways which work best in their situation, at particular times and with specific individuals (through trial and error).

Moreover, parents found the following information on the parenting role very useful:

- *Changes in the parenting role when children reach adolescence*

Information on how the style or approach to parenting needs to change, in response to changes in the adolescent, was particularly helpful to many participants. Parents valued the co-pilot analogy (see section 3.2). This helped them to realise that an important aspect of parenting, especially parenting adolescents, is learning to 'let go' and allowing the adolescent to become increasingly independent and to take over more and more adult responsibilities. They realised that rather than increasing their efforts and doing 'more of the same' when previously successful parenting practices are no longer effective, it may better to adopt a new or different approach. Some examples include:

We felt your poem was very positive and quite inspiring. It kind of leveled out where we stand as parents. Seeing children as dogs and teenagers as cats gave us an understanding and helped us change our perception of our children instead of expecting them to change to our ways.

I've read a lot about children but teenagers are a whole different animal ... I gained a lot from the course seeing it as a different parenting environment and having to change my behaviour to bring out a different behaviour in the teenagers.

It's so difficult to watch your teen drive off in the family car. You have to let go, trust and pray!

- *Differing parenting roles and the role of mothers and fathers*

Information on the different roles of parents (see section 3.2) and the role of mothers and fathers was useful as it provided parents with clearer guidelines for parenting. Many participants appreciated the value of fathers and became more aware of the father's role in their adolescents' lives, especially in the identification process of daughters and sons. Mothers became more aware of their role and appreciated how they often determine the emotional atmosphere in the home. Examples include:

Now that we are divorced, my son's dad spends quality time with him - he's actually forced to find ways to interact with him and this has helped my son's confidence to improve dramatically.

She is a real daddy's girl. She feels special because she knows her dad thinks she's the bee's knees.

I've realised that the mother sets the tone in the home. At first I thought why must everything always be on my shoulders but it is true, the mother sets the tone.

Knowing all the different roles we can play in our teens' lives is helpful and motivating.

Information on parenting roles empowered parents to parent more effectively as it gave them a type of 'job description' which helped them to keep their parenting goals or outcomes in mind. In my practice, I have found that making parenting roles known to parents, especially to fathers after a divorce, can help even previously uninvolved parents to play a more active and effective role in their adolescents' lives.

- *Meeting the emotional needs of adolescent offspring*

Participants and their children experienced the benefits of parents meeting the emotional needs of their offspring by focusing on the four 'theraplay' pillars of a strong parent-child relationship (structure, engagement, nurture, challenge - see section 3.3). As one participant remarked, "Yes, I asked my teenager ...what he thinks I may have learned on this course and he said, I have started listening to his needs. I've become aware that he also has needs - it's not just my needs".

In the literature study I encountered lengthy lists of adolescent emotional needs to be met by parents. I categorised these under the four above-mentioned pillars. I have used these four pillars with parents in my practice and in parenting talks and incorporated them in this parenting programme. The response has always been positive. The effectiveness of this categorization is that it only uses four pillars, which makes it easy

for parents to evaluate their parenting, to identify needs they may be neglecting (especially during parenting difficulties) and to make the necessary adjustments. Different participants highlighted the importance of different pillars or needs. Participants' comments include:

It made me realise that you have to have something that helps you connect with [or engage] your teenager.

I think the love languages helped me distinguish between my two children's needs and helped me realise that I need to handle them differently. I saw how what works for one doesn't work for the other because they have different love languages.

His children seem to need the fun and challenge pillars but I think it's because they feel loved and secure. My children have not had the security and my daughter now values the security pillar in our home, which is quite difficult to get right in a blended family, but she recognises it because it's something she hasn't always had.

- *Parenting in the new millennium*

Parents valued information which could assist them with the particular challenges of parenting in the new millennium. In the feedback after the fourth session (which took place at the beginning of the fifth session) I asked the groups to report back on what they found particularly challenging about parenting in the 21st century and to comment on areas where they needed to be empowered or where they required assistance. These issues were then discussed in the final session. In the final focus group interviews participants agreed that it had enabled them to develop strategies for coping with modern parenting dilemmas. The areas which they had highlighted to be discussed in the final session included the effects of media and technological advancements, safety concerns, materialism, sexual issues and the impact of thereof on parenting (see section 3.6).

All participants were concerned about the effects of media and technological advancements. One parent argued, "The challenges of modern life are an issue –

especially media and technology. They bring an influence into your house which you wouldn't have brought there. We don't always know how to handle it and we feel that we obviously need to educate the child about this so they can make responsible, educated choices and then we are going to have to trust them – but how to do it – that is the issue". Thus, the values that parents try to foster in their homes are often undermined by 'messages' from the media. Parents are often not even aware exactly what these messages are as these 'messages' often appear on their children's own cell phones, the television or computer. Parents therefore do not know exactly what they are up against. This leaves them feeling insecure and lacking in parental control.

Parents' concern over modern parenting challenges is exacerbated by the fact that many challenges are new and were not experienced during the parents' own adolescence. This leaves them feeling helpless; adolescents often are more knowledgeable than parents on many issues. This is illustrated in the following quote:

A couple of issues on kids in the 21st century – we feel we have a lot of issues which stem from us not having been in the position our teens find themselves in. Things have accelerated in the lives of the youth and they deal with stuff that we haven't experienced so it's difficult for us to understand or apply our own knowledge or boundaries. When they are going through stuff that is probably dangerous for them, we don't even know or see it coming because we've not been there".

Parents also realise that while adolescents today often experience similar challenges to those experienced by parents in adolescence (such as sexual issues, peer pressure and risky behaviour) they do so at a much earlier age than parents did. This is illustrated in the following quote, "They grow up too quickly. They've got AIDS to deal with... I think they face some of the same problems we faced, they just face them five years earlier than we did – they deal with things at the age of 12 that we dealt with when were 17". Among others, the media is a reason why adolescents encounter many issues at a very early age. I have counseled a nine year old child in my practice, who suffers from the negative effects of explicit and 'abnormal' sexual material which she came across on the Internet.

Participants value information on adolescent safety. There was much discussion over how much freedom parents can afford to give their adolescents in an increasingly dangerous world. One participant stated, “Children walking in the streets – obviously when we were young it was fine. It’s not fine [or safe] anymore but they still want to do it”. Another said, “There are more risks for children working and going out these days than we were young”. It is beneficial for parents to discuss these issues with the parents of their adolescents’ friends and agree on ‘safety rules’, applicable to all adolescents in a friendship circle. As one mother said, “It’s much easier for my daughter to leave the party early because all her close friends also are leaving at ten”.

Parents who move between two poles of either neglecting their adolescents because of too many commitments or spoiling them by meeting their every need (see section 3.4.5) were evident in this research. Parents valued techniques and ideas suggested to deal with both extremes (see Appendix D – especially session 2 & 6). These two extremes are now discussed in more detail.

On the one hand, both parents work in many families today (see section 3.7.1) and adolescents may be neglected. Adolescents are often left alone for long periods without adult supervision and guidance, which may make them more prone to make poor choices which can be dangerous or result in their not realising their potential. As one parent said, “I don’t know exactly what they get up to in the afternoon I just know that, judging from the school marks, homework and studying are not high on the list of priorities”. Parents are often tired after a day at work and lack the energy to guide or support their adolescents with school work or other issues. As one parent stated, “You come home so tired – you don’t even ask whether the homework is done”.

On the other hand, the programme highlighted that modern parents often raise dependent, inconsiderate and unappreciative adolescents. Certain parents may not ensure that adolescents have tasks and responsibilities, do not expect them to persevere for material goods, pander to their every need and do too much for them. Most homes have domestic help which often means that children do not have to do basic chores (e.g., making their own beds or leaving the bathroom clean after use). This makes them unappreciative. One parent in my practice explained that she battled to like her

daughter and wished she would learn to be more appreciative. Another parent noted, “Kids today are very materialistic. They want the best, the labels but they don’t want to work for it. They want it now!” I noticed, in my practice, how many children and adolescence seem oblivious or insensitive to the needs of others. Many will eat sweets and not offer to those around them, they will want to ‘win at all costs’ and want parents to buy and do things for them, without ever giving a thought to what they can do for others.

Parents were encouraged to realise that they could correct such problems by changing their parenting (see section 6.2.3.5). Neglectful parents learned to overcome this problem by addressing adolescent emotional needs. Parents, who were ‘spoiling’ their adolescents, were encouraged to allow their adolescents to wait and work for things. As one parent said, “I’m so glad we didn’t just buy her the i-pod. She has worked during the holidays and waited until she had enough money. She is so proud of herself and she pointed out last week how carefully she looks after it – she’s learning appreciation – we still have a way to go in this department”. Another parent said, “I’m so glad, I found out in time... I was raising a very ‘me first’, selfish kid who expected everything to be done for her”.

- *Family structure and parenting*

Many participants appreciated the attention given to challenges unique to parenting in different family structures (see section 3.7). For example:

Because of the responsibilities that go with single parenting, it was hard for me to have fun with the kids, to laugh! ... This course has taught me to just lighten up a little – its okay!

The course recognised the outside influences at work in blended families. In our case – there are different families and different rules and to try and blend all that and still stay sane is quite a big thing for us. The teenage issues are there but we as blended families have many other issues.

Many contemporary century challenges discussed above are exacerbated in blended families because adolescents are subjected to different values and parenting methods. As one mother explained, “I don’t want my son to have a television in his room but his father bought him one. We just have such different values”. Parents found it useful to discuss these difficulties with other parents who have had similar experiences.

Many single parents and parents in blended families valued information on the effects of divorce and of ways to help adolescents cope with divorce (see section 3.7.3). One participant mentioned the usefulness of recommended reading on coping with both divorce and remarriage. She said, “The books have become so helpful. When I’m really struggling, I remember – look in my books”. Thus information empowers parents by promoting understanding, identifying weaknesses in parenting, preventing errors and providing effective ways of coping with challenges caused or exacerbated by divorce and living in single parent or blended families.

- *Adolescent and parental communication styles*

Awareness of adolescent and parental communication styles (see section 3.6.5 and Appendix D – sessions 3 & 4) promoted understanding and motivated participants to change their ways of communicating with their adolescents. One participant commented:

I cringed when you gave the example of how parents communicate with teens – because that’s me! I use every single one of the roadblocks to communication. No wonder my son and I knock heads. I also understand now why he reacts as he does. I’m going home to change the way I communicate!

I understand now why she is so argumentative and so critical. I still battle to stay calm when she rolls her eyes or starts yelling at me!

5.3.1.5 Effective parental communication skills

All participants noted that they found the parental communication skills (see Appendix D & E – sessions 3, 4 & 5) an important aspect of the programme. Specific skills which they regarded as particularly effective included:

- *Listening effectively*

Listening effectively was highlighted by all participants as one of the most effective parenting tools. Parents discovered that listening encouraged adolescents to talk to them. As one parent stated, “I picked up that when you listen to the children, they do really talk a lot more”. Listening yielded immediate results and made parents more confident to try more ‘controversial’ or ‘new’ skills, such as skills on discipline and conflict management. Some participant comments include:

Listen! Listen! Listen! – I never looked at it like that before. It was just such a good tool for me and it worked in my home! The children even laugh and say, “Oh must I bite my tongue again, Mom?” We remind each other ... to bite our tongues or to just listen to what the other person is saying – it just worked in our home!

Communication! The application of this was actually the core of the whole thing. I had just snowballed into such bad habits with the children. I kind of forgot to listen to them. So now what I do is, I actually sit down and listen when Bill talks, I actually keep quiet and ...listen to what he is saying.

You taught us how to listen to our kids. I never did before. I would tell them what to do and not *really* listen – that, for me was the most valuable aspect of this programme!

I can’t believe how many times my son said to me, “Mom, you are not listening!” and I just didn’t get it ... Then when I attended the course, I started thinking back and

thinking, “He keeps saying I’m not listening and maybe I’m really not listening”. It took me a while to get there!

- *I’ messages*

Most participants mentioned that the use of “I” messages (see Appendix D - session 4), to communicate parental feelings when the parent has a problem with adolescent behaviour was a very useful parenting tool. By using an “I” message, which highlights how the adolescent’s behaviour makes the parent feel, rather than giving a “You” message which stresses what the adolescent is doing wrong, the adolescent does not feel under attack and is therefore less likely to be defensive in his/her response. Some comments include:

The “I” message really opened my eyes as to how to talk to the teenager!

For me what has really worked is the “I” message. My son responded very well to that. It’s just been working and I haven’t been shouting and he’s been doing and listening!

Listening and the “I” message really helped me with communicating with my daughter and she told me things we may still have to see a psychologist about.

- *Avoiding roadblocks to communication*

Most participants mentioned how they had to work hard at avoiding the roadblocks to communication (Appendix D – session 3). By refraining from ‘solution messages’ (such as, “Get your dirty feet off my new couch”) and ‘put down messages’ (such as, “I can’t expect you to be considerate”), parents found they were able to avoid breakdowns in communication. When they succeeded in doing this, they communicated more effectively with their adolescents. One participant commented:

If his brother’s horrible to him, I actually listen to what Bill has to say – not just saying things like, “Ag Bill, stop being a bully again” or “Shame, poor John”. What has come

out is that John (the little one) has actually been quite a horror and he's been getting away with murder. That was part of our biggest problem before this course – my ways of communicating were stopping my son from being able to communicate with me.

5.3.1.6 Effective skills for handling conflict, power struggles or discipline issues

Participants found the skills presented for handling conflict, power struggles and discipline issues (see Appendix D – session 4 & 5) were essential in a course on parenting adolescents. The following aspects were highlighted as particularly important:

- *Problem ownership*

Most participants mentioned how useful it was to start identifying who needed to own the problem (the parent, the adolescent or both the parent and the adolescent). This helped them to know how to handle or approach the problem (see Appendix D - session 3 -5). Some examples of participant comments include:

We are happy about now being able to start identifying a bit more clearly whose really got the issue and when we've got to jump in and we've got to just stand back – so I think it's making sense for us.

With my teenager, I'm in the habit of taking over. This course showed me, "Hello, it's not your place to do that!" It was a powerful tool for me, as a single mom, to learn to not take over and to allow my son to take responsibility.

I'm not making their problems mine. What has helped has been able to distinguish between you, me and our problem and also noticing that the thing changes within the argument. It could be your problem, later become mine and eventually end up as our problem.

- *Emotional maturity*

The value of emotional maturity in parenting (See Appendix D – session 2) was mentioned by many participants. Parents from single parent families and blended families highlighted the importance of emotional maturity in these types of family where stressors are high and support may be lacking. For example:

Emotional maturity is so important and spouses need to be there for each other. We are learning to stop conversations before they get out of hand. We have to signal to each other to cool it!

What I found was that I was reacting to my son instead of responding to him and I really had to go back and check my level of maturity because I think the reason we were always going at each other was that I was not behaving like the mature adult that I should have been... I've now learnt that I have to grow up and also I think I had forgotten what it was like to be a teen and this has given me real insight.

- *Problem solving using the 'win-win' approach*

Participants from all three groups found the problem solving approach presented on the programme, (see Appendix D - session 5) very helpful in solving problems effectively. One couple commented:

So we've decided, as a family, that that is how we'll deal with this particular issue and our son has actually responded a lot better. This has helped because we've had a few issues but we've handled them a lot better. We've been discussing things and problem solving and there has been no shouting. This had been a problem (especially from my side) because I get very upset about certain things. It's been much easier to solve problems!

- *Boundaries, responsibilities and natural consequences rather than rewards or punishment*

Disciplining by maintaining boundaries and allowing natural consequences to follow boundary violations was found to be particularly useful with adolescents (Appendix D – sessions 2 & 5). Participants noted how much more effective this approach was than simply meting out rewards and punishment. Two participants explain:

The teacher phoned and said my son hadn't handed in an assignment and I stood back and I knew that he needs to take responsibility and bear the consequences. If I didn't have this information, I wouldn't have known and I would have been like a fish wife and gone on and on, taken over the problem ... he had to make arrangements with the teacher to hand the assignment in at a later date and had to get the assignment done.

Another thing is giving responsibility to the teenager. That is something I didn't do and now reap the consequences (with my adult children). I protected them, not allowing them to experience natural consequences of their choices.... I now realise the importance of moving away from rewards and punishments – moving more to choices and consequences – that's how they learn responsibility.

- *Maintaining and promoting trust and confidentiality*

Many participants experienced firsthand how important trust and confidentiality (Appendix D - session 2) are in their relationships with their adolescents. This was one of the most effective parenting 'tools' presented on this course. For example:

We found if you trust your child half the battle is almost won but it is difficult to do. They need to be able to trust us too and one area where parents often break their teen's trust is when they discuss their teens with others – when they fail to maintain confidentiality!

The trust message is effective. We found that if we trust them and they us, it brings out the best in them.

With you getting permission from your children before you share things with us, drove home to me how important confidentiality and trust is to teens.

5.3.1.7 Reassurance, encouragement and empowerment of parents

The course proved helpful in encouraging parents to realise that they are doing well in many areas of parenting. This gave them confidence to work on areas where change or improvement was necessary. Some relevant quotes follow:

What is wonderful about the course is that sometimes there are things that you actually know ... and you are reminded – I used to do that or I should do that more often.

I came to the course totally devastated. I wanted to slit my wrists about the whole situation but by the end of the course (it was so helpful) – I felt empowered.

You know what I realised? I'm not the perfect parent and my children are not the perfect children (and other parents judge you) but I realised that I do a lot of things right...

One thing I've learned about being an effective parent is that it is time consuming and hard work but eventually you get there!

... and I actually realised that I've actually got quite a nice, stable home. It gives you confidence again that that you are actually not doing such a bad job.

5.3.1.8 Meeting parental needs and maintaining marital and co-parenting relationships

Participants found that attending to their own needs and maintaining and improving marital and co-parenting relationships were enhanced their relationship with

adolescents. Improving the co-parenting relationship was most useful in helping to cope with divorce and life in single parent or blended families (see section 3.7.3. – 3.7.6 & Appendix D - sessions 4 - 6). Some relevant quotes include:

We have to see to our needs too! My children have said to me, “Mommy please go to the gym because when you come home you are a much nicer mommy”.

Something I underlined in our notes, which we often forget, is that “the marriage comes first!”

We’ve got an amicable relationship with Jo’s dad and because we have an understanding, it’s allowed us more or less to get on with what we think is right. We do pass big decisions onto his dad as well but we have the kind of relationship whereby he has given us the right to do what we kind of think would be best. Like we learnt on this course, getting the co-parenting role to work is so important – otherwise the kids suffer – they are the ones caught in the middle.

Parents often seem inclined to put their own needs last or to neglect their own needs. By making them aware of the importance of addressing their own needs and giving priority to the marital relationship (where applicable), they were more able to make the ‘guilt free’ decision to put certain of their needs first. This can help children to learn to compromise and become less egocentric. At the same time, parents felt more positive as they did not feel resentful about being manipulated simply to keep their adolescents happy. As one parent said, “It is refreshing to say things like, “I can’t do that for you today because it is Saturday, the day your dad and I go cycling. I’ll gladly help you on Sunday after church – now often when the children need help, they remember that Saturday is not the day to ask – it is mom and dad’s day!”

5.3.1.9 Effective aspects of the programme presentation

Certain aspects of the programme presentation were thought to be particularly effective for many participants. These are as follows:

- *Homework or application exercises*

All of the participants found the homework or application exercises to a beneficial aspect of the programme. Some relevant quotes include:

The thing I found the most useful on the course was the homework. That was the best because it's pointless you going and getting all this information and you don't go home and actually practice it.

The homework was fabulous. It helped us all open up as a family. For the kids, us coming home and saying, "We've got homework", took the pressure off them and they kind of opened up quite easily. They really enjoyed the rating scales. They are actually quite chuffed (impressed) with you. They want to thank you because they think that you've got us right now!

Amazingly, our teenagers loved the homework. The response from them has been so positive! We as parents enjoyed the discussions we ended up having with our kids.

- *Time structure of course*

Closely related to the homework is the time structure of the course. Participants felt that it was beneficial for the course to be held over the six-week period (a weekly two-hour session). This enabled participants time after each session to become better acquainted with course material and to apply what they had learned in their homes. Some relevant quotes include:

I don't know how on earth it would help you to do the course in one day or even over a weekend. ...you really have to go home and work with your children. That's the most useful, the implementation of the information.

I think the key of the course is that you are presenting theory and skills that have to be implemented so the two hour session was enough to get the information across but

you need time to absorb it. I mean it is difficult enough trying to implement it on a weekly basis! If we had to do it all in one go, we would probably lose the plot and probably give up. You can't get it altogether or formulate any kind of rhythm with what you are trying to implement if it's all at once. It was actually quite nice to know (the kids even knew) on a Monday – "Oh, you are going on your course again". It kind of gave us time to work through things.

What was nice was the reinforcement and building onto the message each week ... you have to implement it and try it out and see how it works with your family – so you need time in between sessions for digestion and practical implementation.

- *Group work*

Although initially some participants were not enthusiastic (and in some cases apprehensive) about the group work aspect of the course, all eventually agreed that it proved the most useful aspect of the programme presentation. The commonality of problems made participants in all three groups feel that 'they were not alone in the challenges that they faced'. They found it useful to share challenges and offer support, suggestions and encouragement to one another. Some relevant comments include:

At first when we broke up into groups, I thought, "Oh no, I'm going to hate this! I hate this kind of thing", but actually in the end it was almost the best (all agree). Yes, the thing is we shared... sometimes one of us would just say something and another one would think, "Yes, that's a good idea". You think you are saying something that is negligible but it may be helpful to someone in the group and we are so hungry for support as single mothers.

The remarkable thing I found was the group therapy thing – hearing other people's problems which are so similar to yours – so you are not alone.

The group work was useful. It's nice to hear what other people have to say and it was great seeing how what you taught us is applicable to all relationships not just relationships with our teens.

- *Different parent groups*

The participation of the three different parent groups on the same programme proved helpful to all participants. The participants in nuclear families and single parent families, on hearing the challenges of blended families, expressed gratitude for their parenting situations and recognised that other parents may face even greater challenges than they did. A participant in the single parent group said, “At the start of the course, I was feeling so de-motivated and I was thinking parenting is so hard and poor me and all of that. During the course, I found that after listening to all the other groups (especially the blended families) we actually said to ourselves that this is actually a breeze – we’ve got it quite easy”. Similarly, a participant in a nuclear family stated:

...and being in a nuclear family you start to appreciate what you’ve got and realise that life could be a lot worse than it is. When you start listening to the single parents and especially the blended families (they seem to have the biggest problems of all) – you start to think, “It’s not such a bad set up that I’ve got. Life could be a lot more miserable than it is!”

The participants in the blended family group did not stress the value of the different groups together as much as the other two groups. However, they found it useful and encouraging to discover that other families, although less complex than theirs, experience many of the same problems. One participant stated, “It is reassuring to know that other parents, who are not in blended families, also have some of the same problems we do. It is good to know, even although you are in a blended family, you haven’t lost the plot totally – there are universal kinds of problems”.

Some participants felt that the diverse groups make participants more aware of the challenges of other parents in different family structures, promote understanding and encourage parents to support one other. A mother from a nuclear family said, “All of the kids hang out together and go out with each other. The child, who my daughter went off with in the middle of the night, is in a blended family and now I know what these families have to deal with”. Thus, by promoting understanding, in this case of different

family types, the parenting programme has a positive social impact by bringing more cohesion among parents of different families.

- *Powerpoint presentation*

The Power point presentation gave me, as presenter, to have a structure or guideline for each session and helped to alleviate unnecessary anxiety. Participants commented that the Powerpoint presentation kept them focused and made the presentation more interesting and enjoyable. Some relevant quotes include:

Your Powerpoint presentations were very well done. It was interesting because you kept on having little things that popped up on the screen. I get very easily bored in lectures but you kept having new pictures, quotes and definitions that popped up on the screen and this made it easy to concentrate.

The presentation, the Powerpoint was excellent (everyone agrees) ... If I see, I remember better than just hearing words. If I see, I remember!

- *Practical exercises and participant participation in the programme*

Participants appreciated that the course was not only in lecture format. They found that their active participation in the sessions during group discussions, role play activities and question and answer sessions made the programme more effective. One participant said, "I enjoyed it when you gave us scenarios to discuss and it was interesting to see everyone's take on how they would respond". Another participant said, "We enjoyed the interaction and hearing practical examples of how different people deal with parenting issues".

Most participants expressed appreciation that they were asked for input on the course each week. Initially, this was done simply for research purposes. However, it became clear that this could be helpful in future presentations of the programme as it enables participants to have a say on course content and presentation and serves to make the course more effective as it takes the needs, interests, likes and dislikes of participants into

account. In this way, it is possible to come up with a product, which is almost tailor made for each new parenting group to whom the programme is presented (see section 6.2.3.1). Some relevant quotes include:

It was really excellent that we had a chance to talk and have input about what should be in the course and what we needed from the course. Altogether, by the end it worked out really beautifully.

It was good that people could open their mouths and comment on the course as it progressed – we could express ourselves – the course improved as it went along. You heard us and made sure that the sessions did not have too much information. Our particular parenting needs were addressed.

- *Personal examples and anecdotes of the programme presenter*

Many participants found it helpful that I, the presenter, shared examples from my personal experience as a parent. This as well as examples from the experience of other parents known to me through my practice made it easier for parents to identify with me, to 'hear' and to agree to apply my suggestions. Some examples of participant quotes include:

We really enjoy when you give practical examples of what happened to you or your children or someone – that makes it real and it makes you remember what you've learnt here.

You know what I also liked was you sharing out of your own, personal home. That made you real to us, you didn't look from on top, down on us – we could relate to that ... and also if a professional also battles then you don't feel so bad when you have your bad days.

There I also want to commend you. It was great seeing you presenting the course, being transparent, because we often will hide certain things about ourselves – it's

normal, it's human nature, but for you to be open to us, helped us – also to open up with each other – it was good. I think that's worth mentioning.

- *Course notes and recommended reading suggestions*

The Powerpoint presentation was used to produce course notes and these were handed out at the end of each session (see Appendix E). Many participants commented on the usefulness of these notes. The notes were used to help them apply what they had learned, stimulated further discussion, encouraged reflection on certain parenting issues and to adapt parenting practices. Some relevant quotes include:

When my boss described a problem they had with their teenager yesterday, I hauled out my notes and shared parts of the last session and this gave them a new perspective on the problem.

Sometimes the homework was difficult to do then I chose something else to do but I always something in the notes that I could work with.

My work colleague wanted a copy of my notes. They are just so useful. She has decided from the notes that she wants to do the course if you ever do it again.

Similarly, books available at each session to borrow or buy gave participants the chance to read about relevant areas of parenting.

5.3.2 Weaknesses of the programme and difficulties with programme application

The participants were very satisfied with the programme content and presentation. However, they mentioned the following weaknesses: the amount of information presented (see section 5.3.2.1), the use of role play (see section 5.3.2.2) and a six- week course held over an eight-week period (see section 5.3.2.3). These difficulties were related to the practical application of the programme (see sections 5.3.2.4 – 5.3.2.8). They all

valued what was presented to them and realised that, as with any new approach, much time, effort and patience are needed to apply recommendations successfully in their parenting practice.

5.3.2.1 Amount of information

After the first session, it was clear that the Powerpoint presentation was too long and there was too much detailed information. With each successive session, the programme content became more concise and the amount of detail discussed was determined by the interest, questions and discussion of participants. The participants recognised that although there had been (mainly in session one) a problem with the amount of information, this problem was adequately addressed. They felt that the amount of information presented in each subsequent session was satisfactory for the subject areas presented. Some relevant comments include:

We are pleased with all the information we are getting but it's hard to digest and implement it all. We've got to reflect all the time.

I think everything was useful but I think sometimes it was too much to try and absorb in one go.

Yes, but I think you also improved during the course – by the third session I think the amount or volume of the course was optimal.

It was nicer when the sessions were shorter. It's easier to absorb.

5.3.2.2 Role play

Some participants found the role play beneficial (see section 5.3.1.9); others did not enjoy the role play or did not do the role play exercises properly. Some participant comments include:

We didn't really do the role play. We actually spent the time just chatting about our children and sharing thoughts and ideas.

People are sometimes too shy to do role play.

Some participants preferred discussing scenarios and suggested using case studies instead of role play (see section 5.3.3.3). Others suggested role play with greater input from the presenter (see section 5.3.3.2).

5.3.2.3 A six-week course being held over an eight-week period

Participants were given the dates of the sessions before commencement of the course. They were informed that although it was a six-week course, the course would be extended over eight weeks as one Monday was a public holiday and on another Monday the venue was unavailable. Participants found this a little disruptive. One participant stated:

Even the one or two public holidays we had – it wasn't nice because you lose momentum. You really wait for that Monday and when that Monday comes, you can't go and it's disappointing. I would actually have gone on a public holiday – it was a fantastic course! You actually hunger for ... what must I do next.

5.3.2.4 Changing the parenting approach or style

While parents accepted the value of a new parenting approach, they sometimes found it difficult to let go of previous styles and/or approaches to parenting (see section 3.4). One participant stated:

We have a tendency to the old school and my husband's opening line tonight was, "Children should be seen and not heard". We are very grateful for the information that you give us because it empowers us to understand our teens view point and provides us with a way of dealing with our teens differently but sometimes it's tempting to go back to the old authoritarian approach... I've tried so hard to do all

the right things and open all the communication channels and to bite my tongue but I've got to the point where my children are actually walking all over me.

Although it is difficult to change one's parenting approach, some parents discovered that, in the long term, it was beneficial. Participants found while it is easier to adopt an authoritarian approach, make decisions for one's children and control them with punishment and rewards, this is ineffective in teaching responsibility and self-discipline. One participant stated:

I just keep thinking long term! I know what I want for my children. If you do the old fashioned things you get results now... but nothing happens internally [the changes to the child's behaviour are only temporary. You can't be sure that they'll choose wisely when they are away from your watchful eye].

Moreover, many participants found what was learnt on the course seemed a little one-sided as it required more change and sacrifice from the parents than from the adolescents. One participant stated:

In this course, we have been looking at our relationship with the teenager almost from a one sided sort of view point where the parent is doing all the work...they should also realise that our thoughts and view points are also important to listen to and our problems are also worth listening to...So although I agree we should learn to deal more effectively with them, I don't think they should always be the focus of our attention.

5.3.2.5 Application with different types of offspring

Some participants were discouraged when they found certain skills worked with some of their children and were less effective or ineffective with others. Some relevant quotes include:

One thing I struggle with still, is you've got all these guidelines but you've got two children. What works with one child doesn't work with the other child. Maybe it would be good if we could get help on dealing with different types of children.

I had a situation with my son – with the “I message”. With the youngest one (he's turning ten). I sat him down and I said, “I feel... when you ...” and he looked at me intently and I thought I'm really getting through to him and he said, “Mom, can I have some ice cream?”

It went right over his head (much laughter)... “I messages” work with my other two boys but it didn't work with him so I thought perhaps he was too young.

The boys are not teenagers yet but when I talk to them they listen – they shut up immediately but the girls don't do that.

5.3.2.6 Application in different family structures

While parents in different family structures have common challenges, some challenges are unique to, or more apparent in, specific types of families. Single parents and parents in blended families reported more difficulty with application of coursework than parents in nuclear families. A major difficulty for single parents, as confirmed by the literature study (see section 3.7.4.2) is limited resources. The single parent has access to only one parent's time and talents. As one single mother said, “It's sometimes very hard to give the 'I' message - especially if you are a single mom and you work all day and you've got all these matters to attend to – it's homework and they also just want their time to chill out a little bit”. Another single parent said, “You have to make decisions but you have no one to back you up”.

Blended families have to cope with multiple parents, different value systems and the many emotions present in such families (see section 3.7.6) which make application of coursework challenging. Some relevant quotes include:

Our children (who are in a blended family where there are other parents are involved) are very anti being in the middle. Unfortunately a communication system

in which parents don't speak to each other can be very, very difficult because the kids end up in the middle.

Now my husband has to accept that child's father's input – which is fair but it is his input into how we are going to handle things in our home. This means that my husband is now being told what to do in his own home by another parent who doesn't even live with us. So it really is taxing!

There is conflict being from divorced families and so on. Different parents in the same parental structure have different opinions and values and it causes a lot of upheaval because in one environment children are allowed to do certain things and in the other one, they aren't. The teens can't understand why the heck we can't sort ourselves out because we have our boundaries and the other parents have totally different boundaries.

5.3.2.7 Coping with the challenges of parenting in the new millennium

Parents from all three groups found the information on parenting in the 21st century very helpful but they still experienced many difficulties in coping with these challenges. They still required more information, support and skills to cope effectively with unfamiliar issues for which they feel ill prepared. Some relevant quotes include:

On the sexual side, you know, today's kids are very, very sexual. It's all over the media, it's on their cell phones, and it's on the internet. It's just dumped on them. I really feel that needs quite a bit of attention – how we can help them in this area.

Their father skypes them – so he can see them and they can see him (while they talk on the phone to him) and they don't lose touch as much but then we get these other strange men in other parts of the world skyping my daughter while she's sitting in her pyjamas. I freak out and say to them, "I've taught you your whole life not to talk to strangers and just because he's not standing at the door, but on the computer, you'll talk to him". What's dangerous and what's not? We need to understand technological advancement and make sure we are not left behind.

5.3.2.8 Difficulty in using new parenting knowledge and skills successfully

Participants valued what the programme and experienced some success implementing many aspects of it. However, success takes time and effort. They all, at some point, experienced difficulty or failure at implementing a recommendation. Many noted the importance of simply being aware of their mistakes and shortcomings so that they could handle them more effectively later. I, the presenter, personally experienced how difficult it can be at times to implement 'theory' in real-life crises in the home. Here follows some relevant comments:

We have this one child who says, "You never listen" but if you start listening, he can talk for hours! Eventually you do stop listening, you can only reflect so much, you know! (laughter)

We just found that giving them the opportunity to talk (maybe it's because they are girls, I don't know) they became abusive. They take advantage of the floor they have, the forum they have been given. They feel they can attack usBecause we are now keeping quiet, they are taking those gaps. We are still battling to find that boundary in communication, where we still allow them the freedom but not to take advantage of the forum they have been given.

I came home to World War Three! At first I started taking the side of my youngest child but then the older one became annoyed and I realized I'm not applying what I learned. I then listened and reflected as each one relayed their account. I did not take over the problem – I must admit for the first time in a long while. They sorted out their differences before going to sleep!

It's difficult to apply the lessons we've learned. We (the single moms) need more help with discipline issues. We need time with you to work it through, understand it clearly and then go home and work on it.

Participants also noted that it was important but difficult to integrate the skills learned on the programme. For example, one participant noted that listening and reflection were not always required in situations where her daughter had to solve the problem herself. Another participant had trouble communicating but discovered that he was neglecting one of his son's emotional needs. One of the parents in a blended family stated, "I think the challenge we have is using the information we are learning here and opening the communication channels while still maintaining the boundaries".

To be effective, the parenting skills need to be applied consistently. Participants noted that they sometimes had difficulty doing this or even remembering what they should be doing. This was especially difficult in blended families (where the family dynamics are constantly changing) and in single parent families (where one parent functions without support from another parent). They became aware that successful, consistent implementation is difficult but essential. Some participant comments include:

I think we haven't implemented things consistently and I think that is part of our problem. I think each week we came away with information and we would try that thing but then his daughter may not be there that week, for instance. Our two daughters stick together like glue and they would figure out a weakness in our system somewhere. Once we get into the rhythm of family life and integrate things and become more consistent, I'm sure things will settle down.

As single moms we feel that what we have learned empowers us but from a practical point we don't always have the energy left to implement what we have learned consistently. We don't have someone to remind us to keep our cool or listen. We have to make big decisions alone and don't have partners with whom we can 'bounce off' possible solutions.

5.3.3 Recommendations to change or enhance the programme

5.3.3.1 Ways of ensuring an optimum amount of information

Although all participants believed that it was important that the sessions should not contain too much information (see section 5.3.2.1), they were equally concerned about the danger of omitting important information. They made various suggestions or recommendations in this regard. These were as follows:

- *Making sessions longer*

Some participants suggested making the individual sessions longer but including a break. One participant said, "Perhaps you should make each session two and a half hours (instead of two hours) so that we can have a break after an hour (like we did) and not lose that time in the next hour".

- *Dividing the course into different levels*

By differentiating the course into different levels of complexity, some participants felt that an optimum level of information could be disseminated in each session. Some relevant quotes include:

You could even do a beginners' course, then an intermediate and then an advanced one. I am sure there is still a lot to learn. What you've shown is not everything but you have given us a very good basis on which to work and also we have other questions – for example when parenting younger children or specific parenting issues. I'm sure if you had another course, all of us would attend (general consensus).

The beginners, intermediate and advanced course idea may work because I know there were sessions where you cut back because of time. I wouldn't mind coming back for another six weeks and hearing the rest of it.

- *Doing some sessions with homogenous groups of parents*

Although the participants all recognised value in having parents from different family types on the same course (see section 5.3.1.9), some suggested the groups should separate in some sessions. Thus, each group could focus on challenges more common to their particular family type. The parents in blended families and single parent families felt stronger about this than parents from nuclear families. Some comments are as follows:

Maybe what you have to do is do the nuclear families together with the rest of us – they can have just three sessions and then you can have extra courses or lessons for the single parents and of course us, the blended families (consensus and laughter).

I just know that in the one session on parenting in the new millennium, you had a few points pertaining to challenges in the blended family. I felt that every one of those points was a point of discussion. We could have spent almost the whole session on those points.

I think it would be helpful if we split up in the last session only. We could then deal with the specifics or the tips you gave each group – discussing everything in much more detail.

Perhaps you could start and do most sessions with all three groups and then later get together on different nights with individual groups. This may be difficult from a practical point of view.

- *Having additional in-depth sessions on specific parenting challenges*

Most participants recognised that individual parents face challenges which do not necessarily affect others on the course. They recommended that specific sessions be added for such parents should the need arise. One participant stated:

The problem with things like depression, suicide eating disorders and the like are huge problems with teenagers. Not every parent has these problems so it may be outside the scope of this course to go in depth into these things. Not every parent has the financial means to take their child to a professional. It would be good to have add on sessions on specific problem areas so we could be more empowered in these areas.

5.3.3.2 Adapting the way role plays are done

Some participants felt that role play could be used effectively once participants had become better acquainted with each other or if one used participants who did not experience role play as threatening. For example, one participant commented, “I wouldn’t do it on the first day”; another suggested, “Perhaps you could try to get a volunteer from each group. Once it’s done once or twice, people will relax and one could learn a lot from this”.

Many participants felt that role play would be more effective if performed in front of the whole group and the presenter so that everyone, including the presenter, could comment on the role played response. One participant suggested:

Perhaps what you could do is get two people to do the role play in front of the whole group and you (referring to the presenter) could be commenting, for example, by saying, “This is a reaction which may cause a very negative response in the teen” or “Perhaps you could handle it this way”.

5.3.3.3 Use of case studies

Participants found the use of case studies (extracts from books, anecdotes or scenarios presented by the presenter) were most useful (see section 5.3.1.9). They recommended that case studies be used, perhaps sometimes in the place of role play, to stimulate discussion, to provide participants with an opportunity to ‘wrestle’ with parenting issues and suggest effective practical ways of coping. Some relevant quotes include:

I went and thought about what a person can do to get participation [in place of role play] and I thought to use case studies and questions. For example to give the example of Jenny, who is a single parent, she's divorced and her kids are on drugs. Then to ask questions that the group could discuss – such as – “What are her feelings?” “What are the pressures?” “How should she handle this problem?” - Perhaps they'll have to take it as homework because I don't know how it would fit in with the time frame of the course. Case studies provide more of an opening for discussion because each of our backgrounds is different, our cultures are different.

Yes and the case studies will provide openings for people to ask questions about things that are not really normal [or things which they may have been too shy to ask].

5.3.3.4 Assistance with practical application of parenting knowledge and skills

Although parents found the new skills and information beneficial, all had difficulty in the practical application thereof at some stage (see section 5.3.2.3 - 5.3.2.7). Participants suggested how the course could give more opportunities for practical work. Some suggestions are encompassed in the above recommendations (see section 5.3.3.2 & 5.3.3.3). Some participants suggested more time for discussing difficulties with the application of new skills in their homes. They suggested regular question and answer slots, where participants could be given assistance with their specific application difficulties. Some relevant quotes include:

We need more information on discipline – we need time with you to work it through and understand it clearly, ask questions, discuss difficulties and then go home and work on it.

I think it would be beneficial if we could have more time to ask questions and check whether we are applying what we are learning correctly. Perhaps we could tell you, like she did now – when we give “I messages” the children react like this and then you would be able to point out, as you did, that we are actually giving disguised “You

messages” or we are communicating better but we have to remember the four pillars as well.

5.3.3.5 Journaling

One participant suggested that parents keep a journal or diary while on this course and in future. In this way, they may become more aware of their own personal parenting challenges and may also, on looking back, be encouraged by discovering that they had overcome challenges and successfully implemented new parenting knowledge and skills. She believed that it could be helpful for parents’ adolescents to do the same. It could help them to cope with stress and determine issues which they could discuss with their parents. She stated, “I think it may help to teach parents and teens to journal. It helps you release the stresses of the day. In my work (she works in a crisis pregnancy centre) I’m teaching the teens to journal and get their feelings out on paper”.

5.3.3.6 Providing parents with preparation work

When offering recommendations, most parents were aware that these add to their already full programme and increased time constraints. One participant suggested that parents be given material to work through before commencement of the course to save time and make time for the recommendations mentioned above. She stated:

We had this lady coming from America, who presented a course and there was only a few days that she could be here. What she did was that she gave us stuff that we had to work through before we went on the course – so we came in their prepared for what she was going to say. Maybe you could send information off before hand and let the parents work through it so when they came it’s all in place.

In practice, parents were not sure whether this would work. One parent stated, “Maybe if parents were serious, they would do it”. On discussing this idea with different parents, many felt that it was a good idea but doubted if it would work in practice. Some explained that their time was very limited and they battled to do the short homework activities given on the course. I myself had attended a course which required prior

preparation and I had enquired of other participants whether they had managed to do the preparation work. No one had managed to do thorough preparation: some had not done any preparation; others did it superficially.

5.3.3.7 Increasing the availability of parenting programmes and extending the programme

Throughout the programme participants from all three groups highlighted the value of the programme, the need for such programmes to be available and for parents to be encouraged to attend such programmes. Many participants told their friends about the course and I had many inquiries about future courses. Some participant comments include:

I was very excited about the course. Wherever I've been over the last while (to parties or whatever) I always, always bring up this course and so many people have said things like, "That is so fabulous! Can't we get involved" or "Do they do it anywhere else?" or "Is there a way that I can get the notes or a book?"

You are on to something here which you would be booked up months ahead!

These types of courses should be on an ongoing basis. I look at my friends and think, "If only you had been on this course".

As discussed (see section 5.3.3.1), many participants believed that the course could be differentiated into different levels of complexity or extended to cover specific parenting challenges or stages. In addition, participants recommended that the course be repeated, redone as 'refresher course' or be extended into a type of support group. Some relevant quotes include:

I hope you are going to do more courses. Are you going to put all this into a book? I think it would be very valuable!

And quite honestly, if you could start something like this – like a consultation and we would pay. I think it would be nicer to come with a group like this and say come ladies, “Let’s go once every two weeks” and we pay you and we come and sit as a group and someone might say, “You know what? My child started smoking. What must I do?” and then we need you to help us and because our children are the same ages and in the same set up we can also help and support each other.

5.4 SUMMARY

This chapter contains the findings of the empirical investigation. It commenced with a description of the focus group composition and proceeded with a report of the results which included the findings from the focus groups, the pilot study and the field notes. The findings include the aspects of the programme (content, skills and course presentation) which participants found to be effective in enhancing their efficacy as parents of adolescents; the challenges or difficulties which participants experienced in applying the knowledge and skills presented in the programme and enhancing their efficacy as parents of adolescents; and the recommendations which participants made to change or enhance the programme so that it can become a more effective tool in helping parents of adolescents to enhance their efficacy.

In the next chapter, the conclusions, recommendations and limitations of this study will be provided.

CHAPTER 6:

CONCLUSIONS, RECOMMENDATIONS AND LIMITATIONS

6.1 INTRODUCTION

This chapter provides the conclusions, recommendations and limitations of this research. The conclusions serve to answer the main research question, namely, *How can the efficacy of parents of adolescents be enhanced?* The conclusions also serve to realise the aim of this research, by determining the nature of *a psycho-educational programme to enhance the efficacy of parents of adolescents*. The recommendations provide suggestions for those seeking to develop and implement such programmes in the future and include recommendations for further research. The limitations reflect the shortcomings of this study.

6.2 CONCLUSIONS

Conclusions from the literature study as well as the empirical investigation are provided. Both identified challenges involved in parenting adolescents as well as ways of overcoming these challenges and enhancing parenting efficacy. This research has shown that by integrating this knowledge into a psycho-educational programme, parents of adolescents can be helped to become more effective parents. Adolescents can also be parented in such a way that they can overcome developmental challenges to realise their potential and become well-adjusted, productive members of society. The success of the above mentioned psycho-educational programme was determined by (a) the content of the programme and (b) the presentation of the programme. The conclusions from the literature review and empirical investigation, regarding these two aspects and how they can be effective in enhancing parenting efficacy are discussed. This is followed by a short explanation on aspects which made the psycho-educational programme in this research 'new' or unique in some way and thus contributed to the body of knowledge in this field.

6.2.1 The content of a programme to enhance the efficacy of parents of adolescents

Programme content should include useful information and techniques as these have been shown to promote parental awareness, knowledge, understanding and skills. This, in turn, encourages parents in their parenting role and serves to empower them to become more effective parents. What follows is a discussion of useful information and parenting techniques or skills that need to be included in the content of a psycho-educational programme to enhance the efficacy of parents (see Appendix D).

6.2.1.1 Information on the adolescent life phase

The research identified adolescence as a transitional life phase, characterised by many developmental changes, which can cause challenges for adolescents, affect their behaviour and make it difficult or challenging for parents of such adolescents to parent effectively (see Chapter Two and sections 3.6 and 5.3.1.1). Useful programme content includes the following:

- *Physical development during adolescence*

By learning about the physical and hormonal changes associated with puberty (see section 2.2.1), parents obtain insight into the physical changes occurring in their adolescents and they come to a deeper understanding of the psychological and behavioural effects which these changes have on their adolescents (see sections 2.2.2 & 5.3.1.1). They are encouraged to seek ways of providing parental support (see section 5.3.1.1) to: adolescents who are experiencing difficulties as a result of early or late maturation (see section 2.2.2.1); adolescents who are self-conscious or self-absorbed as a result of an increase in body awareness (see section 2.2.2.2); adolescents who are struggling in their search for a sexual identity (see section 2.2.2.3); adolescents who have sleep difficulties or whose sleep patterns are proving problematic to those around them;

and moody adolescents whose behaviour is challenging to themselves as well as to others (see section 2.2.2.5).

- *Cognitive and moral development during adolescence*

Information on cognitive and moral development during adolescence (see sections 2.3 & 2.4) makes parents aware of: how moral development is rooted in cognitive development; the effects of cognitive and moral development on adolescent behaviour; and of how parents can cope with this behaviour and the challenges presented by such behaviour (see section 5.3.1.1).

- *Psycho-social development during adolescence*

Information on psycho-social development and the life tasks of adolescence, especially that of identity formation (see section 2.5), make parents aware of the need to seek ways of supporting adolescents and of choosing parenting styles, communication techniques and conflict solving strategies which help adolescents to successfully complete these life tasks (see sections 2.5.2.6; 3.4; 5.3.1.1). Parents realise the need to re-examine the parenting role; change their parenting approach to encourage increasing independence and to move into the 'co-piloting role' during adolescence, that is, finding effective ways of helping to facilitate the identification process of adolescence (see section 5.3.1.4).

- *Challenges common to parents of adolescence*

By including challenges common to parents of adolescence (see section 3.6), in the content of a psycho-educational programme, parents feel 'normal'. The commonality of problems encourages them as they no longer feel alone and this empowers them to adapt their parenting strategies to overcome challenges (5.3.1.1). In addition, the above information on the developmental phase of adolescence reminds parents of their own adolescent years and enables them to be more 'in touch' with their adolescents, promoting understanding and fostering a closer relationship between adolescent and parent.

6.2.1.2 Information on the parental life phase

The research revealed the usefulness of giving information on the mid-life parental life phase (see section 3.5.1) in which most parents of adolescents find themselves (see section 5.3.1.2). This information made parents aware of their own developmental changes and challenges and how these coincide with changes and challenges which are part of the adolescent period. This enhanced their understanding of themselves and their adolescents. It made it easier to cope with the resultant conflict and upheaval, encouraging parents and empowering them to seek ways of meeting 'normal' common challenges of parenting adolescents.

6.2.1.3 Information on generational theory and its effects on parenting

The research revealed that, according to generational theory, the generation in which people are born affects the way they live and, as is pertinent in this study, the way they parent (see section 3.5.2). It was useful for parents to study generational effects and become aware of why they behave the way they do; why their adolescents behave the way they do; why they were parented by their own parents; and how their experience of being parented, in turn, affects the way they parent. Parents discovered that this knowledge could help them to change ineffective ways of parenting (such as parenting in ways which are the extreme opposite of how they were parented or repeating their own parents' mistakes). Instead, they could choose more effective parenting strategies which could even be effective in closing the 'generation gap' and fostering closer ties between different generations and between parents and their adolescents (see section 5.3.1.3).

6.2.1.4 Information on parenting in the 21st century

The empirical research revealed a number of reasons why information on parenting effectively in the 21st century should be included in any modern parenting programme (see sections 5.3.1.4 & 5.3.2.7). Firstly, there are contemporary parenting challenges, which

parents of earlier generations either did not have to deal with, or which were evident to a lesser degree. These include:

- challenges brought about by the influence of media and technology;
- safety concerns;
- working parents;
- materialism; and
- sexual issues.

Secondly, parents felt ill equipped for many of these parenting challenges as they had not experienced firsthand when they growing up. They felt vulnerable as their adolescents appeared more knowledgeable about certain issues, especially those relating to media and technology.

Thirdly, the fact that adolescents are facing such challenges at an increasingly earlier age, made parents recognise the need to become more knowledgeable to protect their children and parent more effectively.

Finally, this research revealed that parents in the 21st century are confronted with parenting choices which were 'creating' dependent, inconsiderate, unappreciative adolescents, or alternatively adolescents who were being 'neglected' in some way. They valued been made aware of how changing their parenting could, on the one hand, help them to raise a generation which could be less self-centred and more productive members of families and society; on the other hand, take measures to ensure that their adolescents are not neglected (see sections 5.3.1.4 & 6.3.2.1).

6.2.1.5 Information on family structure and parenting

Information on the influence of family structure (see section 3.7) on the parenting role was found to be an essential component of an effective parenting programme (see sections 5.3.1.4 & 5.3.2.6). The increase in the divorce rate, single parent families and blended families create many new parenting challenges. While some of these may be

common to all families, others may stem from the family structure. This information on family structure should include:

- specific challenges in nuclear families;
- specific challenges in single parent families;
- specific challenges for step-parents or blended families;
- divorce effects; and
- ways of overcoming the above.

6.2.1.6 Information on parenting styles and approaches

By including information on parenting styles (see section 3.4), parents are helped to stand back and view their parenting style or approach more objectively. They are able to evaluate the efficacy of their style and see the value of changing or of modifying their approach with different offspring or in different situations (see sections 5.2.3.4-5.2.3.6).

6.2.1.7 Information on the parenting role

The research revealed that participants found it very useful to obtain information on the parenting role (see sections 3.2 & 5.3.1.4). Having clearer role definitions and by becoming aware of how roles change and need to be adapted, parents were able to formulate a kind of 'job description' which helped them to have parenting goals and outcomes to guide their parenting. This helped them to parent more purposively and thus more effectively. Information on the parenting role should include:

- the general role of parents;
- the role of mothers and fathers;
- how the role changes as offspring move from childhood and on through adolescence;
- different roles which parents can play in different circumstances;
- the importance of meeting adolescents' emotional needs;
- the parents' role in developing emotional maturity in themselves and their offspring;
- the role of parents in the 21st century;

- adapting roles in different family structures; and
- the role parents can play in fostering communication with adolescence.

6.2.1.8 Parenting skills or techniques that enhance the efficacy of parents of adolescents

As shown thus far, a psycho-educational programme to enhance parent efficacy should provide a solid knowledge base (see sections 6.2.1.1-6.2.1.6) to increase parental awareness and understanding and to motivate parents to improve their parenting efficacy. Such a programme must also include practical skills and techniques which parents can develop to apply parenting knowledge with their own adolescents. Skills or techniques should include:

- *Effective communication skills for parents of adolescents*

This research revealed that adolescent-parent communication is often problematic and that the improvement of communication between parents and adolescents is an essential component of a parenting programme (see sections 3.6.5; 5.3.1.5; 5.3.2.5 & Appendix D – sessions 3-5). This should include the following:

- active listening and reflecting;
 - effective use of “I” and “You” messages; and
 - avoiding common parental roadblocks to communication.
- *Parenting techniques that meet adolescent emotional needs and foster emotional maturity*

The inclusion of the four pillars of theraplay (structure, engagement, nurture, challenge), a play therapy technique which I use in my practice, as a way of meeting adolescent emotional needs (see section 3.3 & Appendix D – session 2), proved to be a very useful part of the research programme (see section 5.3.1.4 & 6.2.3.2). This provided parents with a very simple way of assessing whether these needs were being met, as well as practical examples of ways in which each need could be fulfilled.

In addition, the programme should show parents how to raise emotionally mature adolescents and how to become emotionally more mature themselves (see Appendix D – session 2). This research revealed how beneficial such emotional maturity was to personal growth and family relations, especially in single parent families and blended families (see sections 5.3.1.6).

- *Effective ways of disciplining, managing conflict and problem solving*

This research revealed that parent-adolescent conflict is common (see section 3.6.1) and that a parenting programme should include skills which enable parents to discipline, manage conflict and solve problems effectively (see section 5.3.1.6 & Appendix D – sessions 3, 4 & 5). This should include skills which help parents to:

- systematically 'let go' and hand over responsibilities to the adolescent;
- implement choices and consequences rather than rewards and punishment;
- determine who has the problem and to then act accordingly; and
- implement the 'win-win' approach to problem solving.

This would also include helping parents cope with challenges common to parenting adolescents (see 3.6.1). Parents would be helped to determine when they need to step in and help adolescents with their problems and when they need to seek outside assistance (see Appendix D – session 4).

- *Effective ways of maintaining trust and confidentiality*

Parents valued learning ways of developing and maintaining trust and confidentiality in their relationships with their adolescent offspring (see section 5.3.1.6 & Appendix D – session 2). Trust is essential in any relationship and parents need to learn to trust their adolescents and demonstrate this trust. At the same time parents need to prove their trustworthiness and need to learn ways of maintaining adolescent confidentiality.

- *Ways of meeting parental needs and maintaining marital and co-parenting relationships*

Parents should learn how to communicate their own needs in the family (see sections 5.3.1.5 & Appendix D –session 4). They should also learn ways of meeting their own needs and of maintaining marital and co-parenting relationships (see section 5.3.1.8 & Appendix D – session 4 & 6).

- *Helping parents to integrate skills and be flexible in their skill application*

As revealed in this research, parents value information and skills but need much assistance with the application thereof (see sections 5.3.2.4 – 5.3.2.8). A parenting programme needs to help parents to integrate parenting skills and become flexible and creative in their skill application (see Appendix D – session 5).

6.2.2 The presentation of a programme to enhance the efficacy of parents of adolescence

This research revealed that both programme content and the way this content is presented affects its efficacy (see sections 5.3.1.9 & 5.3.3). Ideas on programme presentation, emerging from the research, are now discussed.

6.2.2.1 Time structure of course

Dividing the programme into a number of sessions, to be held at regular time intervals (for example, once per week) was found to be useful because this gives participants the opportunity to go home after each session, apply what they have learned, return to the next session, discuss application difficulties and reinforce skills and information (see section 5.3.1.9). Extending the programme over too long a period could have practical limitations (see section 6.4).

6.2.2.2 Amount of information included in each session

It is important to ensure that an optimum amount of content is presented in each session. The programme loses its efficacy if sessions have too much information as participants become overwhelmed and find it difficult to absorb, remember and apply so much information (see section 5.3.2.1 & 5.3.3.1).

6.2.2.3 The inclusion of different parent groups and group work

Having parents from different family structures on the same programme; arranging for them to work within these groups for part of each session; and having feedback from each group in each session can foster parent efficacy (see section 5.3.1.9). This serves to:

- encourage parents (by helping them to realise the universality of problems and that their problems are sometimes minor in comparison to other parents);
- give them an opportunity to learn from other parents in similar and different family types;
- give them an opportunity to focus on issues as they relate to their particular family type;
- make them aware of other parents' challenges; and
- foster inter-parent understanding and co-operation.

6.2.2.4 Powerpoint presentations

Presenting each session with the aid of a Powerpoint presentation (which is colourful, animated and informative) serves to facilitate participant interest, concentration and the ability to absorb and remember programme content (see section 5.3.1.9). It also gives the presenter a guideline for each session and alleviates presenter anxiety. The Powerpoint presentation should be of an optimal length. In the research, the Powerpoint for session one was found to be too long and this was adapted in subsequent sessions.

6.2.2.5 Course notes and recommended reading lists

Programmes should include course notes and provide recommended reading lists as this helps participants to build on what they learnt in the sessions. It assists them in the application of programme material and helps them to explore issues or areas which are interesting or challenging (see section 5.3.1.9).

6.2.2.6 Creating multiple opportunities for practical application and the use of real life scenarios

An effective psycho-educational programme needs to lead parents through an interactive process involving three aspects (see section 1.6.1), namely:

- *awareness* (whereby they are given information and skills to make them aware of the phenomenon of effective parenting);
- *exploration* (whereby they are given opportunities for active participation and practical application of programme content); and
- *personalisation* (whereby they are given opportunities to personalise this exploration by assessing and understanding their own parenting experience; evaluating their parenting needs, priorities and values; identifying and adjusting parenting goals and developing the resources, for example, attitudes, approaches and skills and a plan of action to meet these goals.

The above process ensures active participant involvement and seems to encourage and empower parents (see section 5.3.1.7). It makes them realise that they are doing many things right. They come to understand why some parenting practices work and others do not, and they become motivated to change and adapt their parenting to increase their parenting efficacy.

The research programme showed how providing multiple opportunities for practical application and the use of real life scenarios (see section 5.3.1.9 & 5.3.3.2 – 5.3.3.6) can help programme participants to be effective parents. This would include things such as:

- group work (eg. discussions and role play);
- homework exercises;
- real life anecdotes provided by course presenters;
- case studies;
- journaling;
- question and answer sessions;
- feedback sessions; and
- parent preparation work (before sessions).

6.2.2.7 Extending the programme

The research revealed that participants may benefit if the programme is extended in some ways to provide additional or on-going parental education and support (see sections 5.3.3.7 & 6.3.1). This could be done by:

- having regular 'refresher' courses;
- having extra in-depth sessions for particular parent groups or parenting challenges;
- having different course levels (eg. beginners, intermediate and advanced); and
- providing on-going support groups for parent groups.

6.2.3 Aspects of the research programme which are new or unique

While this research programme is similar in some ways to other parenting programmes and workshops which I have studied and/or attended, some aspects make this programme 'new' or unique. These aspects are as follows.

6.2.3.1 Creating a customised programme for the particular parent group attending the course

At the beginning of the first session, each participant was asked to write down their expectations (i.e., what they were hoping to learn or gain from the programme). In

addition, feedback sessions were held at the beginning of each subsequent session, giving participants an opportunity to comment on what they liked and/or disliked about the previous session, as well as to suggest what changes or adaptations they would like to make to the partially planned, upcoming sessions. The initial participant expectations and regular participant feedback were then used to adapt and customise the programme as the course progressed. Programme content, the amount of information, the type of homework exercises and presentation methods (such as the Power point presentation length, timing of tea breaks and application exercises) were changed and adapted to be as applicable as possible to the parents attending this particular presentation of the course (see section 5.3.1.9).

6.2.3.2 The use of 'theraplay' pillars as a tool for parents to meet adolescent emotional needs

The use of the four pillars of theraplay (structure, engagement, nurture, challenge), a play therapy technique which I use in my practice, as a means whereby parents can be helped to parent more effectively by adequately meeting their adolescent's emotional needs has proved to be a very useful aspect of this programme (see sections 3.3 & 5.3.1.4). These four pillars seemed to succeed in providing the rationale and motivation for parents to apply the other techniques or skills presented on this course (eg. communication, conflict management and problem solving techniques) and prevent them from 'neglecting' their adolescents.

6.2.3.3 Assisting parents in different family structures within a general parenting programme

Arranging parents into groups according to family structure from the outset of the programme (for the group work parts of the course) proved to be a 'new' way of assisting parents. This enabled the programme presenter to attend to the particular needs of parents from each family type (see section 3.7) while, at the same time, making them feel part of the larger parent body. I think this fosters inter-parent awareness and understanding and encourages parents to be more community minded (see section 5.3.1.4).

6.2.3.4 Including generational effects on parenting in this programme

This is the first parenting programme for parents of adolescents encountered that includes the generational effects on parenting (see sections 3.5.3 & 5.3.1.4). I believe that this provides parents with a tool which helps them learn from the past (how they were parented), better understand their present parenting behaviour and hopefully avoid negative or 'less effective' parenting choices which could be brought about by generational effects.

6.2.3.5 Preventing modern parents from raising ego-centric adolescents

Following on from the previous point on generational effects, this research made the researcher and participants aware that modern parents could be making choices which are causing them to raise children and adolescents who are individualistic, dependent, ego-centric (or self-centred) and selfish. This seems to be caused in part by parents who have adopted a style of parenting which puts the child at the centre of things and which fails to help the child to look outwards, to 'see that it's not all about them'. The programme supported parents to enable adolescents to learn that they too need to stand back, allow others' opportunities and make a contribution for the benefit of people other than themselves (see sections 3.4.5 & 5.3.1.4).

6.3 RECOMMENDATIONS

In the light of the above conclusions, the following recommendations are made:

6.3.1 Recommendations for a psycho-educational programme to enhance the efficacy of parents of adolescents

Recommendations for a psycho-educational programme to enhance the efficacy of parents of adolescents are as follows:

- (1) Ensure that the programme has the necessary content to enhance the parent efficacy of parents of adolescents (see section 6.2.1 & 6.2.3).
- (2) Ensure that the programme presentation is conducive to effective learning (see section 6.2.2).
- (3) Adapt the programme to the culture, socio-economic status and needs of the participants.
- (4) Use participant feedback to customise the programme for the particular parent body attending each presentation of the programme (see sections 5.3.1.9 & 6.2.3.1).
- (5) Include extensive recommended reading lists for each session (see section 5.3.1.9).
- (6) Establish ongoing support groups and/or additional workshops on specific topics or for specific parent groups (see section 5.3.3.7).

6.3.2 Recommendations for further research

Recommendations for further research are:

- (1) Investigation of the parenting experiences of parents of adolescents of different cultures, creeds and socio-economic groups in South Africa and developing, implementing and evaluating programmes to enhance their parenting efficacy.
- (2) Investigating the experiences of parents of children who are in a life phase other than adolescence (e.g., parents of pre-schoolers or pre-teens) and developing, implementing and evaluating programmes to enhance their parenting efficacy.
- (3) Investigating parental effects on juvenile delinquency (or other pressing issues) and developing, implementing and evaluating a programme designed to prevent juvenile delinquency.

- (4) Developing, implementing and evaluating parenting courses or workshops which are of a shorter duration (see limitation 2 below) and focusing on specific parenting issues. Alternatively formulating courses which can be divided into different levels or sections (e.g., beginner or introduction; intermediate; and advanced). In this way, they will be arranged in more manageable 'time units' (see section 5.3.3.1).
- (5) Investigating support groups for parents and developing, implementing and evaluating parenting support groups (see section 5.3.3.7).

6.4 LIMITATIONS OF THE STUDY

The limitations of this study are as follows:

- (1) This study was conducted with a select group of parents of adolescents living in a small area of South Africa. Findings may therefore not be applicable to parents:
 - of other cultures, creeds and socio-economic groups;
 - living in other places within South Africa;
 - living in other parts of the world; or
 - who are parenting children who are in a different life phase.
- (2) The programme was for six weeks only. It may be difficult or impractical for parents to participate in a course extended over a longer time period.
 - Parents who signed up for the programme were highly motivated to attend and they remained committed; most of them attending each of the six weekly sessions. Less motivated parents may find it difficult to maintain this kind of commitment over an extended time period.
 - It is difficult, even for committed parents to find a six-week period in which they do not already have prior commitments. A number of parents initially expressed interest in the programme but, on finalisation of the programme dates, realised that some sessions clashed with prior commitments and they had to withdraw their applications to attend the programme.

6.5 SUMMARY

As can be seen, adolescence is a transition period of life characterised by many changes and challenges and parents of adolescents have the task of guiding adolescents successfully through this stage so that they can grow and develop into healthy, well-adjusted adults who are capable of actualising their God-given potential. While doing this, many parents have to cope with their own mid-life transition period, 21st century parenting challenges, generational effects and the challenges brought about by changes in family structure. Psycho-educational programmes can be effective in helping parents of adolescents to overcome these challenges and enhance their parenting efficacy.

This chapter concludes the research. It provides an integrated report on the conclusions from the literature study and the empirical investigation, which endeavoured to answer the research question: *How can the efficacy of parents of adolescents be enhanced?* It also served to fulfill the aim of this research, by determining the nature of *a psycho-educational programme to enhance the efficacy of parents of adolescents*. The recommendations provided suggestions for those seeking to develop and implement such programmes in the future and also included recommendations for further research. Finally, it discussed the limitations of this study.

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APPENDIX A

INFORMATION LETTER & APPLICATION FORM

CALLING ALL PARENTS OF TEENAGERS!!!!

WHY?

A local educational psychologist, Pam Kerr, is to be presenting a programme for parents of teenagers. This forms part of her research for her Doctorate in Education (Psychology of Education). Pam has a private practice and is well known to many of the learners, parents and teachers at our school, having worked (and continuing to work) with learners, parents, teachers and other helping professionals in the quest to help our children to overcome obstacles and develop their potential.

WHAT?

Pam will be presenting a **PARENTING COURSE**, namely:

“PARENTING TEENAGERS EFFECTIVELY” –

WHEN?

The course will be held in the **second term** of this year. It will consist of six weekly sessions. These sessions will be held on **six consecutive Monday evenings**. The **programme will begin on: Monday, 21 April 2008**. The duration of each session will be approximately 2 hours. The sessions will run from 7pm to 9pm.

WHERE?

George Medi-Clinic: In Conference Centre on the First Floor. (Address: Varing Lane, George).

WHAT NOW?

If you are interested in participating in this course please fill in the attached application form. For programme efficiency, it has been decided to limit the size of the parent group.

APPLY NOW! Parents most suited to the research parameters will be selected and only those selected will be contacted by the researcher.

APPLICATION FORM – PARTICIPATION IN PARENTING PROGRAMME

Please complete this form, place it in a sealed envelope and hand in at the school secretary.

Name: _____

Contact Numbers: Home: _____ Work: _____ Cell _____

Information on your teenage children:

AGE OF TEENAGER	MALE/FEMALE	GRADE
eg. 13	Female	8

Information on Family Type: (Please tick block which is applicable to your family)

* See explanation for different family types below the table

My family is a:

NUCLEAR FAMILY	<input type="checkbox"/>
SINGLE-PARENT FAMILY	<input type="checkbox"/>
BLENDED FAMILY	<input type="checkbox"/>

*

A nuclear family refers to a family consisting of a mother, father and their own children.

A single-parent family refers to a family in which one parent (either the mother or father) lives with and cares for the children.

A blended family or step-family refers to a family in which at least one parent is not the biological parent of at least one child.

Please note:

After the presentation of the programme, the researcher would like participants to take part in one focus group interview to discuss and evaluate the programme. In the case of nuclear and blended families, the researcher requests that both parents attend the course if at all possible.

The researcher will contact those people selected as participants in the programme, well before the commencement date, to make final arrangements. The researcher thanks all applicants.

APPENDIX B

INFORMATION & DECLARATION OF CONFIDENTIALITY

PARENTING TEENAGERS EFFECTIVELY (Presented by: Pam Kerr)

PARTICIPANT INFORMATION SHEET (to be completed by each participant)

NAME: _____

POSTAL ADDRESS: _____

TEL (Home): _____

TEL (Work): _____

CELL NUMBER: _____

DETAILS ABOUT CHILDREN:

First Name	Age	Gender	Grade	School

FAMILY STRUCTURE (Mark appropriate block with an X):

Nuclear Family (Group 1)	
Single Parent Family (Group 2)	
Blended Family (Group 3)	

DECLARATION OF CONFIDENTIALITY:

I, _____ promise to maintain confidentiality in terms of the group discussions during the parenting programme and the focus group discussions to be held after completion of the programme.

Signature: _____ Date: _____

APPENDIX C

INTERVIEW GUIDE FOR FOCUS GROUP INTERVIEWS

BASIC QUESTIONS POSED

- (1) What were the most useful aspects of the programme?
- (2) What were the least useful aspects of the programme?
- (3) What are your comments on programme implementation/ presentation (What worked? What didn't work? What did you like/ dislike?)
- (3) What have you implemented? (What have you tried at home and what was the result?)
- (4) Any other comments – what should have been added or what should have been left out of the programme?

RELEVANT THEMES

Relevant themes that may come up in interview and the answering of the above questions:

- **Content of the course** (see Appendix D)
 - Understanding the adolescent
 - Understanding the parent
 - The parenting role (including co-piloting role; meeting emotional needs/four pillars; parenting styles and approaches; trust and confidentiality)
 - Communication (when the adolescent has the problem)
 - Communication (when the parent has the problem)
 - Conflict, discipline and power struggles (when the parent and the adolescent has the problem)
 - Parenting in the 21st century ('modern' parenting challenges; coping with challenges in different family types; overcoming divorce effects; and fostering co-parenting relationships)

- **Presentation of the course**

- Time structure of course
- Group work
- Power point presentation
- Notes
- Practical application (such as role play, scenarios/case studies, anecdotes, question and answer sessions and homework)

APPENDIX D

PARENTING PROGRAMME

SESSION 1 UNDERSTANDING THE PARENT AND THE ADOLESCENT

Part 1: What's up with my child?

- Making parents aware that a different approach is needed when parenting adolescents
- The physical, cognitive, emotional and social changes of adolescence and the effects that these have on adolescent behaviour and on parenting of adolescents

Part 2: What's up with the parent?

- Making parents aware of mid-life changes common to parents of adolescents
- Generational and other factors affecting parents of adolescents

SESSION 2 WHAT IS EXPECTED OF PARENTS OF ADOLESCENTS?

- Meeting the emotional needs of adolescents (the four pillars) and fostering emotional intelligence
- Parenting styles and the effects of these styles
- Developing an effective parenting approach or style
- The important role which parents can play in adolescents' lives - This includes:
 - the general role which parents need to play in their children's lives;
 - how this role changes when children reach adolescence (co-piloting role);
 - the role of mothers and fathers
 - the different roles which parents play in different situations and stages
- The importance of trust and confidentiality

SESSION 3 COMMUNICATION 101 (When the adolescent has the problem)

- Common adolescent and parent communication patterns
- Coping effectively with adolescent communication patterns

- How to communicate effectively when the adolescent has the problem (listening and reflecting effectively and avoiding roadblocks to communication)

SESSION 4 COMMUNICATION 101 (When the parent needs to help the adolescent with problems and when the parent has the problem)

- When parents need to step in and help adolescents with their problems (eg. emotional difficulties such as depression, anxiety, eating disorders, addictions or problems with self-image; academic problems; social difficulties such as bullying etc.)
- When the parent has the problem (the effective use of “I messages”)
- Communicating in such a way that adolescents ‘hear’ what the parent has to say
- Meeting parental needs and maintaining the co-parenting relationship

SESSION 5 CONFLICT, DISCIPLINE & POWER STRUGGLES (When the parent and the adolescent have the problem)

- Effective ways of coping with conflict; discipline issues and power struggles
- Problem solving strategies (the “win-win” approach)
- Integrating parenting skills and maintaining consistency
- The importance of parental flexibility
- Fostering parental creativity and pro-activity
- The process of ‘letting go’

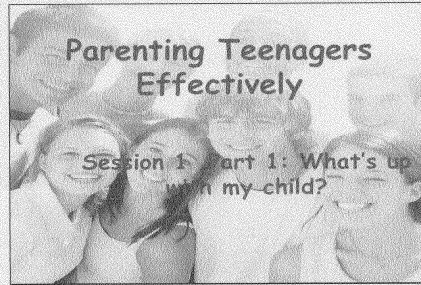
SESSION 6 PARENTING IN THE NEW MILLENIUM

- Coping with the challenges of parenting in the new millennium
- Parenting in ways that encourage adolescents to be ‘other-centred’ rather than self-centred, as well as independent and responsible
- Focusing on overcoming challenges specific to the three different parent groups included in this study (single parents, parents of nuclear families and parents in blended families).
- Helping adolescents overcome divorce effects
- Overcoming animosity and fostering co-parenting relationships

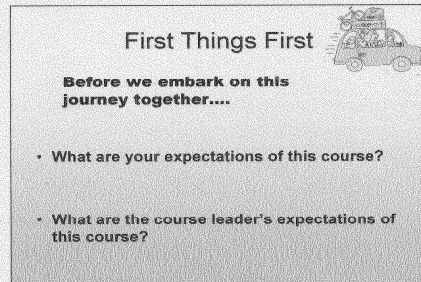
APPENDIX E

COURSE NOTES (Some slides from session 1)

Slide 1



Slide 2

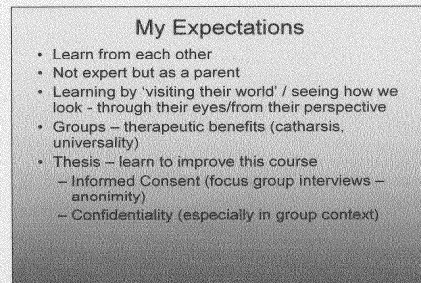
A slide with a light background. At the top, it says "First Things First" next to a small cartoon car icon. Below that, it says "Before we embark on this journey together....". There are two bullet points: "• What are your expectations of this course?" and "• What are the course leader's expectations of this course?".

First Things First

Before we embark on this journey together....

- What are your expectations of this course?
- What are the course leader's expectations of this course?

Slide 3

A slide with a light background. The title is "My Expectations". Below it is a list of bullet points: "• Learn from each other", "• Not expert but as a parent", "• Learning by 'visiting their world' / seeing how we look - through their eyes/from their perspective", "• Groups – therapeutic benefits (catharsis, universality)", and "• Thesis – learn to improve this course" with sub-points "– Informed Consent (focus group interviews – anonymity)" and "– Confidentiality (especially in group context)".

My Expectations

- Learn from each other
- Not expert but as a parent
- Learning by 'visiting their world' / seeing how we look - through their eyes/from their perspective
- Groups – therapeutic benefits (catharsis, universality)
- Thesis – learn to improve this course
 - Informed Consent (focus group interviews – anonymity)
 - Confidentiality (especially in group context)

Slide 4

3 Main Aspects

- TEACHING/INFORMATION
- GROUP WORK
 - Different people to report back each time
 - Try to give each group member fair share of "air time"
- APPLICATION (Homework)

Slide 5

What comes to mind when we hear the word teenager?

Moody Interesting Idealistic

Sensitive Self-Conscious


Argumentative Confused

Question: How can I recognize an adolescent?
Answer: You can tell an adolescent not so much by the way she looks as by the way she slams the door in your face after you have said something offensive, such as "hello". (Lewis Burdi Frumkes)

Slide 13

DEVELOPMENT AND CHANGES DURING ADOLESCENCE

PHYSICAL DEVELOPMENT **Santrack**
PUBERTY **8896**



"a period of rapid physical maturation involving hormonal and bodily changes that occur primarily during early adolescence"

Slide 14

MAIN CHANGES



- **Growth spurt**
- **Changes for boys:**
 - More rapid growth of the testes and scrotum and the appearance of pubic hair
 - Increase in the size of the penis
 - Development of body and facial hair
 - Breaking or lowering of the voice
 - Sperm production
 - Nocturnal emissions (or wet dreams)
 - More masculine body build

Slide 15

Changes for girls:



- Breast development
- Appearance of pubic and underarm hair
- Enlargement of the uterus, vagina, labia and clitoris
- Menarche (the onset of menstruation)

Slide 16

- **Gradual process:**
Puberty generally starts at about 11 years of age for girls and 13 years of age for boys.
- **Age of onset of puberty appears to be dropping:**
In Norway, in the 1840's, the average age of menarche was 17, compared to 13, in 2006. Similarly, in the United States of America, the average age of menarche has declined significantly since the mid-nineteenth century.

Slide 45

Dads don't gloat....

Dad's also may experience a midlife crisis of sorts.


Let's discuss this

future I could have been... status
provision

Competent to advise my son achievement

Slide 46


Right at the time when parents need to be understanding and supportive of their adolescent children as they undergo the drastic changes of adolescence, parents are often faced with many adolescent-like issues of their own.



The major life task of parents is:
GENERATIVITY

Slide 47

GENERATIONAL EFFECTS



Generational effects influence our parenting!!!

- GI's born between 1900 and 1925
- SILENTS born between 1930 and 1949
- BOOMERS born between 1950 and 1969
- XERS born between 1970 and 1989
- MILLENNIALS born between 1990 and 2005

Let's look at some of the characteristics of Boomer parents
(Read a piece from the book - "Mind the Gap")

Slide 48

Parents bring their children up in the style that is fashionable or current at the time (Codrington & Grant-Marshall 2004:75).

Silent generation parents left their babies to cry for long periods, often in a separate room. Boomers, on becoming parents, reacted to this by breastfeeding on demand and allowing their babies to sleep with them in their beds.

There appears to be a trend for each generation to go to the opposite extreme in areas, where they believe, their parents failed.

Slide 49

OTHER FACTORS AFFECTING PARENTING

- Socio-economic factors
- Cultural factors
- Parenting styles (our parenting styles and those of our parents)



Remember mom and dad often differ when it comes to the above factors

Slide 50

So where does that leave us as parents of teenagers?

- Parenting, like life, is difficult. (Expect challenges - that's how we grow)
- Parenting takes *time* and *effort*.
- There are no recipes and "one size fits all" ways of parenting teenagers.
- With each new parenting challenge, we need to move through the following 3 stages:

- Awareness
- Exploration
- Personalisation

Slide 51

Group Discussion/ Things To Ponder

- How were you as a teenager? How does this affect your parenting?
- What kind of parenting did you receive?
- How would you have liked your parents to have been?
- Does the way you were parented affect your parenting?
- Do you & your spouse differ in your parenting ideas & approaches?

Slide 52

APPLICATION

Let's rate our relationship with our teenagers

On scale of 0.....10

How is my relationship with my child?

Where would I like it to be?

How can we move it closer to where we'd like it to be?

Let's pose the same questions to our teenagers.

Begin with the end in mind

Slide 53

RATING SCALES

MINE

MY TEEN'S

APPENDIX F

TRANSCRIPT OF A FOCUS GROUP INTERVIEW

Key:

Italics- Interviewer

A line is skipped after each participant response.

[] – indicates words which have been altered slightly to clarify meaning

FOCUS GROUP 2 (Parents in nuclear families)

To start, what was the most useful aspect of the course?

I would definitely say the fact that you taught us how to listen to our kids. I never did before. I would tell them what to do and not really listen – that, for me was the most valuable.

I think it was the change in how you deal with things – looking at it differently. For example when they make their problem your problem – handling it differently – and the outcome has definitely been better.

Do you mean deciding about whose problem it is?

Yes!

Absolutely and the “I message” really opened my eyes as to how to talk to the teenager. The other thing is the four pillars. You clearly defined the idea about the four pillars [or aspects of a strong parent-child relationship] and ways these could be implemented. So the course was wonderful and very useful to us. I don’t know what others opinions are?

You know what/ There are no sure ways of parenting. There are so many different facets that influence it. What you’ve given us is something to work with. You’ve given us the four pillars that we can base how we bring children up on – where before we had nothing!

Like a framework?

Yes!

I found all the information was useful and a lot of it was new to me – to be honest. So there was a lot to take in but all of it was useful. The remarkable thing I found was the group therapy thing – hearing other people’s problems which are similar – so you’re not alone and being in a nuclear family, you start to appreciate what you’ve got and realise that life could be a lot worse than it is – when you start listening to the single parents and especially the blended families – they seem to have the biggest problems of all! You start to think, “It’s not such a bad set up that I’ve got. Life could be a lot more miserable than it is”.

I’m actually going to say something to you. I was very excited about the course. Wherever I’ve been over the last while (to parties or whatever) I always, always bring up this course and so many people have said things like, “That is so fabulous! Can’t we get involved” or “Do they do it anywhere else?” or “Is there a way that I can get the notes or a book”

So are you saying there is a need for a course like this?

Yes, there is a need!

You are onto something here which you would be booked up for months ahead!

Absolutely!

You could even do a beginners course and then an intermediate and then an advanced one (much laughter). I’m sure there is still a lot to learn. What you’ve shown us is not everything but you have given us a very good basis on which to work and also we have other questions – for example, when parenting younger kids.

I’m sure if you had another course, I’m sure all of us would attend. (General consensus)

Definitely! Even if it was the same course, I’d come again!

Anyone else who would like to comment on anything they found useful?

What I found is that I was reacting to my son instead of responding to him and I really had to go back and check my level of maturity because I think the reason why we were always going at each other [having conflict] was that I was not behaving like the mature adult that I should have been. The minute he said something, I would react to him. I've now learnt that I've got to grow up and also I think I had forgotten what it's like to be a teen and this has given me real insight - and everything you did, I found myself thinking, "Oh, I wish I had been treated that way when I was a child". I, in a sense have turned into my mother. It's weird but it really helped me in that. It's helped me to see things from his perspective and has made the whole way I treat him and the way I respond to him is totally different. It's really helped!

I'm glad! Has everyone had a turn to answer the first question?

(General consensus that they feel the thing they find most useful has been covered in the above discussion)

What do you think was least useful?

I think everything in the programme was useful. (General consensus)

I think everything was useful but I think sometimes it was too much to try and absorb in one go.

Yes, but I think you also improved during the course – by the third session [the amount/volume of the course was optimal]. It was really excellent that we had a chance to talk and [have input about the course and what we needed from the course]. Altogether by the end it worked out really beautifully.

The other group mentioned the role play didn't work and they didn't really do it.

We did it and it was great! (All agree)

Perhaps what you could do is get two people to do the role play in front of the whole group and you could be commenting, for example by saying, “This is exactly the reaction you shouldn’t be having” or “You could handle it this way”.

Yes, you couldn’t get to all the groups and see everybody’s role plays so perhaps it better to do it in front of the group.

Some people find this quite intimidating!

I wouldn’t do it on the first day.

Perhaps it could be done on a volunteer basis.

Yes, perhaps you could try to get a volunteer from each group. Once it’s done once or twice, people will relax.

Any comments with regard to the whole programme and it’s implementation?

I actually think it could be longer. There is so much information and you want to get as much as you can. I don’t know how you’d do it but ...

That’s why I suggested breaking it into a few courses (beginners, intermediate etc) because I know there were sessions where you cut down because of time. I wouldn’t mind coming back for another six weeks and hearing the rest of it.

[We like the once a week format]. It couldn’t be more often than that because we need time for implementation...

...and digestion!

Yes, and digestion!

To try it with your family!

You can't do it as an intense course during the weekend or something!

You could possibly do it in a day or two – it's possible but what's nice about this is the reinforcement of the message, week after week, for six weeks. If you go for one day, a week later it's all blown out your mind. This way [you kept on being reminded of what you learning]. (General consensus)

To change any habit you have to be consistent with it for at least two weeks so by doing it once a week over six or even eight weeks it helps make a huge change in [how you are doing things with your teen].

It was unfortunate that we had some public holidays during the course.

The other group found the public holidays disruptive. So perhaps it would be a good thing to choose six weeks where there isn't a public holiday on a course day?

Or if there is a public holiday, you could just do the course the next day.

Yes, so you don't miss out on that week – [wait an extra week for the next session]

It's possibly the best time of day because people couldn't do in the mornings (those who work).

Yes, it was very good for me to have fathers on the course and it would possibly be difficult for fathers to come in the morning.

You have to do this course over a number of weeks. Every sentence is a concept that you have to take and digest and discuss and so on. You can't just read it and forget it – you have to implement it! You have to try it out and see how it works in your family – so you need time in between [for you to implement things correctly.] We are so grateful to you for such wonderful material.

Perhaps you should make each session two and a half hours (instead of two hours) so that one can have a break after an hour and not lose that time in the next hour.

It's tricky because if it runs too late it also is not ideal.

Yes, it's difficult with children as well – one has to organise baby sitters.

Perhaps just be very strict about the times – just have a ten minute break.

Take your coffee and come and sit down.

The presentation, the power point was excellent! (Everyone agrees)

If I see, I remember better than just hearing words. If I see, I remember!

The group work was useful. It's nice to hear [what other people have to say] and also that just like what you've taught us applicable to all relationships not just the relationship with your teen and what the other groups said was also applicable to us. Everybody's problems seem to be the same.

It might just be at a different level.

Having the different groups helps you appreciate what you've got even more. (Much laughter).
Wow, the fact is the blended families make the rest of us on the course feel that, compared to blended families, our parenting task is so much easier than it could have been.

Now perhaps you could mention anything that you have implemented and what happened?

I did implement something! Unbeknown to me, I implemented it. It was on consequences. My daughter had a friend to sleep over and my husband was away. My teen daughter usually loves to put me to bed and she locks up. I thought she was doing it because she cared. She put me to bed and locked up and half past twelve my cell phone rings and it's her name on the cell phone so I answered it and said, "Hello" and the voice on the other end said, "Whose that?" and I said, "Where are you?" (thinking now she's in the bed) and the phone went dead. I thought that's weird so I shout her name and shout her name but don't get an answer. So I go to the room and poke what I thought was her bottom, I drew the covers back and I discovered pillows!

(Sighs and gasps all round)

[It's true what you told us – teens engage in risky business!] How old is she?

She is fourteen. Her and a friend had put cushions in the beds and had left the house. I knew this is not something she would usually do! So I knew it came from her friend. So faster than you could blink, I phoned her back and used a few colourful words and asked her where she was. She explained that they were in one of the main streets of our town, a long way from our house. When I asked how she had got there, she said they had walked.

I jumped in my car, I raced there because I was terrified. I get there and there was a young girl and a guy with them. I didn't even speak to them. The young guy explained that they had phoned him to come there because they were scared. Anyway I took them home, confiscated their cell phones and then of course I couldn't sleep. I left it because I was so angry! [I'm glad I'm learning to calm down first and respond rather than react]. The next morning, I walked in there and they were both awake and I asked them what the word consequences meant. They knew the meaning. I asked what the consequences of their actions could have been. They said, "We could have been raped, murdered, kidnapped". I said, "Exactly! Do you know, you made me worry immensely, you lied to me, you were dishonest, not to mention your brother was left sleeping in his bed and I had to leave him to come and fetch you and that puts him in danger! He has asthma and if he had an asthma attack while I was out looking for you – then what?" They spent the day washing windows and the consequence was for one month there was no sleep overs, no hanging out together and her cell phone was taken away. [I didn't perhaps do it completely correctly and I didn't get the "I" message right exactly, but she understood my feelings and she had consequences for her actions.] I asked her why she did it and she said she didn't want to do it – her friend wanted to do it and she was scared to let her go on her own. [We spoke of different ways she could handle it in the future] and I explained that she is breaking a circle of trust – I'd rather you not do things behind my back – put out there and let's sort things out together.

[It once again shows the strength of peer pressure!]

So the way you handled this helped you to communicate about peer pressure and how she could handle it in the future.

[Yes, by "pushing the pause button" parents can remain calm and emotionally mature in difficult circumstances with their teenagers].

Yes, I've learnt that you have to think before you say and I've had to learn to bite my tongue and like you said, we've got to be more emotionally mature. I also always used to react – not respond. It's not easy, we had a situation where I went into a supermarket with the children and said they should come with [and help me choose things they like for their lunch boxes]. We were communicating quite nicely and then the children started bickering because they were comparing prices and accusing each other of taking more and they kept saying things like, "Why is she getting more?" or "Why is she getting that?" I stood in the supermarket and said to myself, "Whose problem is this? Is it my problem?" I said, "It is your problem. If you can't communicate properly we'll have to leave it" [We ended up going home and they then had nothing special in their lunch boxes. The next day they tried again and were able to shop in a better manner]. So there was problem solving! I just thought, "I'm not going to become a screaming housewife!"

It's difficult not to become too involved when our children are fighting but we see here how effective it is when we don't take over.

Yes, my children were fine with each other for a few days after this incident in the supermarket. It lasted! It was wonderful!

I had a situation with my son – with the "I message". With the youngest one (he's turning ten) – I sat him down and I said, "I feel ... when you do ..." and he looked at me intently (and I thought I'm really getting through to him and he said, "Mom, can I have some ice cream?" It went right over his head! (much laughter). Is there an age at which it works or is it just ... cos I thought I did it correctly.

Remember we said on the course that 'I messages' don't always get immediate responses and we make ourselves vulnerable, as parents giving these messages. You can give him another 'I message'. You could say, "We can talk about the ice cream just now but I feel upset that I was just sharing my feelings with you and you don't seem to be listening". Remember we said it's important for us to help our kids not to be so ego-centric. Remember these are new ways of operating but they don't work every time and there is 'no one size fits all' approach to parenting. Perhaps - keep trying with the 'I messages' – it's new for your child. Remember parents often change 'I messages' to disguised 'you messages'.

'I messages' work for my other two boys but it didn't work with him so I thought perhaps he was too young.

[It can work with all ages. His age could have an effect – but just keep at it and see how it develops. I give an example of how my child recently ignored one of my 'I messages' and how responding with a second 'I message' was effective in obtaining her attention]

I think it's got a lot to do with his concentration. When I started with this 'I' thing, I think he thought, "Oh I'm going to get my word in here" because he has such a hard time sitting still!

When you said the "I", he thought of the ice cream! (much laughter)

Could be! But I'll try again!

Any other things that you've tried and how did it work?

It's just remembering to do what we have learned – but it does work! I'm finding I'm much more relaxed! Not getting as worked up as easily. I still do – but I think, less often.

Yes, he's not reacting and not fixing everything!

Yes, I just sort of stand back – especially if it's their problem! I'm not making their problems mine. Being able to distinguish between you, me or our problem and also noticing that the thing changes within the argument. It could be yours and then become mine and eventually end up as our problem.

We have this one child who says, "You never listen" but if you start listening, he can talk for hours! Eventually you do stop listening, you can only reflect so much, you know! (much laughter)

One wonders perhaps whether he has a real need for attention?

He does!!

So maybe it's important to check the four pillars and whether you are meeting these needs.

Perhaps we need to check all the pillars. He just seems to demand more and more attention.

Maybe this is then changing to a 'Your problem'. You can give an 'I message' explaining how difficult it is to listen at a particular time or that you want to listen but only have an hour and need to cook supper, help brother with homework...

Oh, I've tried that but it doesn't work.

And if you give the boundary – "I can listen to you but I can listen to you for so long only" – but then you need to be firm on the boundary.

[General consensus – these different things work together and are linked in many different ways]

One thing I've learnt here is that the schools here are different from where we come from (an overseas country) in that they get projects that they cannot do themselves and in a way, their problem becomes our problem because they need tools, materials – we are not used to such complicated projects. Maybe it's good – to some extent it involves things like thinking skills but we think the involvement of parents in these projects is too great.

I think the love languages helped me distinguish between my two children's characters and helps you realise how you handle them differently – you see how what works for this one doesn't work with that one because they have different love languages.

Any other comments?

Are you intending to put this all in the form of a book – this material?

Maybe at a later stage.

I think your research has been very thorough. I think you've touched on a little bit of everything. I don't think you need to put in more – it will just be too much and I don't think you need to take out anything. I think the information you have for this particular course is 100%!

Yes, I think if you take stuff out, we as the uninformed public will think that for instance – problem solving – everything has to be treated that way – and it's not the situation. What I'm trying to say

there are so many aspects – there are different love languages, you have to understand the four pillars, you have to know how to handle problems (the you, my and our problems). I think it's a nice balance. Like you said just now we have to combine the communication with the four pillars – he obviously has a need which has to be fulfilled. It's just having a broad enough base to work from. You are not going to turn us all into child psychologists – there is no ways you can convey everything you've learnt – which is possibly why you started initially with a lot to say because you have all this information and you want to convey it all.

You have to have all that information on the teenager!

Yes, you have to understand where they are coming from.

We have to understand! As you say, we are not psychologists so we don't know the theory or the story behind why and what they doing. That all is important for us – to have that information. It helps us as the programme goes to understand so that's the reason why we have the four pillars and so on. And like she said as well, you forget what it was like to be a teenager. It was a few years ago you know! (laughter)

I can't believe how many times my son said to me "Mom, you are not listening!" and I just didn't get it because I was actually trying to fly the plane and not being the co-pilot. My son came to you (for therapy and in the feedback, with his permission) you told me he feels I don't listen and I still didn't get it. Then when I attended the course I started thinking back and thinking, "He keeps saying I'm not listening and maybe I'm really not listening." It took me a while to get there.

You have to learn how to listen as well.

That's why it's good that it gets reinforced week after week.

Yes, it won't do any good if you do it in one weekend session.

It was good having time for asking questions. We all had trouble interpreting certain things and then the questions come and you will explain no it may be better this way and we say, "Oh okay I had it wrong" or "I had it right" or whatever the case may be.

At the end of each part of the course you gave ratings. So I think if (I may express the opinion of all of us) out of 10 – we would give you 10. (Much laughter and general consensus)

This was a very useful course. In many instances we learnt new concepts and we are very grateful. I'm involved in [science and technology] so I have not been involved in such courses but you opened our eyes. Thank-you very much!

It was good that people could open their mouths [and comment on the course as it progressed] - express themselves – the course improved as it went along (Not too much information).

I did this because I was evaluating the programme but perhaps this will be a useful aspect to keep in the course?

This part ended up being a very good part of the course and it was like group therapy.

It might from your point easier to split the groups – not have them altogether – nuclears on their own and blended on their own – we can all glean a lot from each other but we found being with the other groups – it gives you perspective – you learn a lot.

And from a societal point of view it gives people insight into what other people around them are going through. Perhaps even helping us to be supportive to other parents.

Yes, very definitely. (General consensus)

All the kids play together and go out with each other. The child who my daughter went off in the middle of the night with is in a blended family and I now know what these families have to deal with.

Ok. Is that it?

(Nods all round)

Thank-you very much!