

FINAL EVALUATION REPORT
Barrio Families Program
July 2002

I. Overview of the Intervention

Program Description

Luz Social Services, Inc. (LSSI) implemented a family strengthening intervention in 11 Census tracts in the Southside of Tucson. The target population consisted of low income, barrio families living in the area who are at-risk for substance abuse.

The overall purpose and long-term goals of the project were to increase community capacity to enhance family resiliency and reduce familial substance abuse within a culturally relevant environment. The project used a community development framework to mobilize and to empower barrio families through capacity building and training activities to select and to deliver best practices in a family strengthening model program. The aim for the selected program was to maximize effectiveness in preventing or reducing alcohol, tobacco, or other illegal drug use and associated social, emotional, behavioral, cognitive, and physical problems of parents and their children.

An integral part of LSSI efforts within the community was to foster community development through community cooperation, collaboration, and communication among barrio families to carry out proposed goals and objectives successfully. Based on the extensive experience of LSSI in the Southside community and its office in the area, Luz Southside Partnership (LSSP), the Barrios Families Project drew on this network to enhance project activities, hire barrio liaisons, and to identify and convene community stakeholders, with particular emphasis on low-income Hispanic families, to participate in the project.

The program consisted of two phases: the project design phase (October 1, 1999 – July 31, 2000) and the implementation phase (August 1, 2000 – September 30, 2001). During Phase I, facilitators were trained and the model consensus panel/pilot cohort (n = 11) was selected. This was achieved through a joint process of selection with the programs services director of the Head Start Child-Parent Center serving the Southside. Model family intervention programs were reviewed and the Strengthening Multi-Ethnic Families and Communities: A Violence Prevention Parent Training Program was selected. Based on levels of acculturation—measured through the Acculturation Scale for Mexican Americans (Cuellar, Harris and Jasso 1980), a cultural adaptation survey (developed in-house) and discussion with consensus panel—the model was modified to reflect the life experiences, values, and cultural beliefs and practices of the community. The model was pilot tested during this time period. Phase II was implementation of 13-unit program. This was followed by voluntary participation in a review/support group that met for 90 minutes once a week.

Conceptual Framework

To increase community capacity to enhance family resiliency and reduce familial substance abuse the project used the community development approach to empower barrio families through capacity building and training to select a model family-strengthening program parents that would

be acceptable and embraced by the community. According to the *Effective Community Mobilization: Lessons from Experience* (1997), both researchers and program developers consider the community development approach to be a promising means for motivating communities for the greatest likelihood of effecting positive change related to complex social problems (see also, Florin and Chavis n.d.; Harachi et al. 1996; Lofquist 1983; Wandersman 1981).

The community development prevention approach uses a modified version of the successful *promotores* approach which employs indigenous leaders—defined by the community and not an external authority or entity—who are trained to conduct in-home meetings and eventually teach culturally relevant parenting training models. To culturally market a parenting training model it is necessary to recognize the role of the extended family and religion in such concepts of *compadrazo* and a historically driven worldview of family and gender roles in imparting the familial knowledge and skill base inherent in the notion *dedicarse a ser padres*.

Hispanic and some other minority groups (e.g., Native Americans) have a “collateral” and cooperative form of interaction structure in contrast to the more individual, competitive form found in the dominant society (Sue and Sue 1990). The reality of this distinction demanded that a different type of methodology be used for the decision-making and selection process of the parenting training curriculum. By using a consensus-building model of decision-making a process was instituted that was inclusive and non-hierarchical. It also was compatible with the core structure of Hispanic life. Marcus and Fischer (1986) note the importance of ritual inherent in religion as a process that validates and supports the norms of the group. Religion is intricately woven into the fabric of Hispanic culture and family life and is understood as supporting the values of cooperative models of interaction and decision making through rituals such as marriage and baptism. Religious rituals are part of a process of validation of the extended family systems inherent in the structures of *compadrazo*, which further bond individuals and families (Acosta 1989).

In choosing the appropriate curriculum, it was important to consider how well the model reflected the needs of the community and how well it could be modified to fit the target population needs of the community in terms of acculturation, situational appropriateness, cultural competence, and language.

Four model programs were reviewed by a community consensus panel and evaluated according to their ability to satisfactorily address sixteen (16) risk and protective factors. Based on study and review of the models, the Strengthening Multiethnic Families and Communities Model was selected based on its ability to address these factors and to provide a culturally relevant program for the predominantly Mexican American community of the Southside. It was important the curriculum be flexible enough to incorporate cultural modification while maintaining its integrity. In other words, there should be no barriers to understanding and using the model or its tools. In addition, the model’s key components—importance of communication and relationships within the family, community involvement, cultural and spiritual focus and rites of passage, and positive discipline—reflect and respond to the strengths of the community and family, the cultural heritage of the people, and the means to incorporate positive aspects in support of violence prevention.

The Strengthening Multi-Ethnic Families and Communities Program integrates a variety of prevention/intervention strategies geared toward reducing violence against self, family, and community. The program targets ethnic and culturally diverse parents of children ages 3 to 18 years who are interested in raising children with a commitment to leading a violence-free, healthy lifestyle. It is based in the theoretical construct and the empirical evidence that different forms of violence to the self (substance abuse, suicide), in the family (spousal, child, and elder abuse), and within the community (crimes, gangs) are interconnected and that family variables are particularly strong predictors of antisocial and delinquent behavior in youth.

Because cultural relevancy was a key consideration in executing the model each session was carefully reviewed and analyzed. Additions and modifications were made based on responses to a cultural adaptation survey and facilitator and evaluator's knowledge and familiarity with the community. All potential changes were reviewed with the consensus panel for appropriateness and significance of activity.

Population and Risk and Protective Factors

Population. Based on the 2000 Census, 84,040 people live in the Luz target area. Of that number, 70 percent are Hispanic. According to the 1995 census update residents are young compared to the rest of the state, with approximately 38 percent under the age of 20 and 76 percent under 44 years of age.

A 1998 cultural assessment of the Southside community shows that over 60 percent of the population speak Spanish and of that number 44 percent speak mostly English, with some Spanish. Thirty-nine percent (39%) prefers to speak both languages while similarly, 39 percent read and write English better than Spanish. Ninety-percent of the residents in the area were born and raised in the United States. Thirty-one percent identify themselves as Mexican American, and 29 percent identify themselves as Chicanos. Over 65 percent of parents were born in the United States with many parents identifying as Mexican (51%). However, over 50 percent of the grandparents of the community members were born in Mexico. This survey highlights the cultural diversity of the target population and reinforces the need to develop culturally competent services that are responsive to the needs of this Hispanic community.

Risk Factors. In 1998, Luz Southside Partnership contracted Dr. Richard Cervantes, an outside evaluator, to conduct a risk and protective factor community survey in the Luz Southside target area. He administered and analyzed surveys from 24 community leaders from the region. Respondents identified substance abuse, youth violence, and teen pregnancy as the top three problems facing their community with environmental risk factors also being identified. Results from the study show over half of those surveyed felt drugs were the primary reason for problems among youth in the Southside community, with alcohol (30.8%) ranked second.

Responses to the community survey showed substance abuse risk factors are heavily identified in the individual, peer, and family domains, with peer pressure and broken families cited as the predominant risk factors. Youth involvement, alternative activities, parent education and involvement, and prevention education services were recognized as the leading protective factors against substance abuse. LSSP area saw 25.54 percent of all narcotics violations, 20.24 percent

of liquor law violations, and 20 percent of disorderly conduct violations in the city. In other words, one fourth of all illicit drug use and sales in the city occur in the Southside. Moreover, the Southside area has one of the highest liquor license outlets per square mile ratios in the state, with an average of 10 outlets per square mile. Some areas of the Southside have ratios higher than 20 outlets per square mile.

The leading cause of death at mid age (45-64) in the Southside is cirrhosis, primarily a liver disease that is a manifestation of binge and excessive drinking habits. This implies the normalization of drinking in the population that is served by LSSP. A second health indicator is ischemic heart disease (blockage of arteries around the heart), of which a primary factor is smoking. This data suggests ATOD is part of the norm within the Southside as opposed to the exception.

Environmental risk factors affecting Southside residents include excessive liquor licenses and an abundance of billboards advertising alcohol, tobacco, and guns. Tucson has 501 billboards within the city limits, with one-third (172) located in the targeted area. According to Grube and Wallack (1994) the more Hispanic youth are exposed to beer commercials, the more likely they are to would drink as adults and to hold positive beliefs about the social and ritual uses of beer and alcohol. Another environmental risk factor is the excessive number of liquor licenses issued to businesses in the community. There are approximately 240 liquor licenses in the Luz target area facilitating alcohol access to youth and families.

The LSSP area has 17 percent of the Tucson's population. It can be inferred that the catchment's area should reflect approximately 17 percent of the crimes for the entire city. In most categories of violent crime, the Southside surpasses the proportion of crime expected for the area. In 2000, the area had more than 27.42 percent of homicides, 21.65 percent of sexual assaults, 20.39 percent of aggravated assaults, and 22.45 percent of other assaults. The Southside also saw 25.54 percent of all narcotics violations, 20.24 percent of liquor law violations, and 20 percent of disorderly conduct violations. This data indicates low neighborhood attachment, a leading risk factor in the community domain of prevention. While the leading cause of death for children in the United States is accidents, the leading causes of death for youth in the Southside of Tucson are homicides and suicides.

Several indicators demonstrate that Southside residents are at higher risk for poor health status because of availability and access to health care. Hispanics constitute the largest uninsured ethnic group in the United States. In 1998, over one-third of all Hispanics (34.2%) lacked health insurance. The Southside community is also traditionally poor in resources that would promote proactive health and behavioral health prevention services. Of the 12 general hospitals located in Pima County, only one is in the Southside. Of 1304 primary care physicians in the county, only 78 practice in the Southside. The ratio of primary care providers to people is 1086:1 in the Southside; for the rest of the county it is a 664:1 ratio. Poverty levels are also high in the target area. According to the 2000 Census, 20.1 percent of families in Tucson and 54.3 percent of families in South Tucson with children under the age of 18 currently live below the national poverty level. This compares to 16.4 percent for Pima County and 15.2 percent for the state.

Statement of Problem

As illustrated by the above profile of risk factors for the Luz area, the target population suffers a host of socioeconomic problems: economic disadvantage, high juvenile crime rate, substance abuse, and low access to health care services. In addition to low access to health care services, it is clear the risk factor of limited resource availability also affects the target population. In contrast to the greater metropolitan Tucson area only 13 percent of the social, health, and recreational services are located within the Southside neighborhoods. Other than school-based programs, there are relatively few resources to provide substance abuse prevention, treatment and social services. Additionally, many helping agencies and/or organizations do not have sites or offices within the Southside, requiring residents to travel to other parts of the city to access services.

The demographics of the families in the Luz target area document need for a family strengthening program. Kumpfper, (1994) notes that most use and abuse of ATOD occurs in the home while parents are away, in the youth's cars or friends' homes and not in or around schools. She states this confluence of factors suggests a family problem rather than a school problem. She postulates that the reduction of ATOD can be more effectively addressed if the locus of intervention was the family instead of peer refusal skills or other non-family centered intervention. In a study by Coombs, Paulson and Richardson, (1991) of peer versus family influence on non-use of ATOD by youth, they found that parental influence was more important in youth's reason for non-use. This was true for both Anglo and Hispanic youth age's 9-17 years of age. Studies also indicate a direct pathway between Hispanic family and youth use of ATOD. Schinke et al. (1992), indicate that low maternal education is a "significant precursor" of youth's failure in school and results in failure to bond with schools and pushes youth towards drug-using peers. Socioeconomic status of Hispanic families indicates a disproportional large number of poorly educated single head of households females with subsequent at risk youth as depicted in Table 2. These households are typically large average family sizes and are at higher risk for youth use and abuse of ATOD.

Theoretical Assumptions of Strengthening Multi-Ethnic Families and Communities Program

The impetus for the program is based in some striking findings. The first is the strong interconnectedness of a number of forms of violence—violence against the self (drug use, depression/suicide), violence in the family (child, elder, and spousal abuse) and violence in the community (juvenile delinquency, crime, gangs, etc.). The second is the wealth of research pointing to family variables as strong predictors of antisocial and delinquent behaviors. To this is added the findings of resiliency research, which suggests the importance of parental involvement in supporting and encouraging children to have goals, aspirations, and a purposeful life.

In addition to the above factors, the program is designed to provide direct parent training. This has been identified as an effective approach for reducing behavioral and emotional problems in youth. The model also addresses the need for relevancy and sensitivity to the many ethnic and cultural perspectives present in most American communities. To address the multiple issues of child behavior effectively and to obtain the greatest parental involvement, cultural relevancy and awareness must be at the crux of any prevention message.

Based on the above factors, the following list of constructs was used to evaluate the effectiveness of the violence prevention parent training program:

- Family conflict
- Family cohesion
- Parent competence (perceived changes in attitude and behavior)
- Family/community involvement
- Child competence (perceived changes in attitude and behavior)
- ATOD use
- ATOD knowledge, attitudes and behaviors

Description of Intervention

The *Strengthening Multiethnic Families and Communities Program: A Violence Prevention Parent Training Program* was chosen by the Barrio Families community consensus panel after extensive review of four family strengthening programs. The prevention/intervention program is aimed at reducing drug/alcohol/tobacco use, juvenile delinquency, gang involvement, teenage suicide, child abuse, and domestic violence. It provides comprehensive parent training designed to meet the needs of parents from different ethnic/cultural backgrounds, with children between the ages of 3 and 18 years of age. Across the span of thirteen (Orientation and 12 program), three-hour sessions, parents are guided through a logical process of developing a model of positive discipline within the family setting. Information is presented within a cultural/spiritual framework that encourages parents—through discussion and activities—to share their family, history, and cultural roots and values. Participants are taught strategies to assist them in developing a positive framework in which to communicate and discipline their child and with which to enhance their child’s self-discipline, self-esteem and self-confidence. They are also given tools to help them and their children with anger management and conflict. The parents learn about their important role as models for their children and how their parents were models for them. Participants are also provided with information about domestic violence, substance abuse, gang involvement, depression and suicide (Steele n.d.).

Following the selection of the model, the implementation of the training program began May 31, 2000.

Research Hypothesis

Based on completion of this program it is anticipated (1) parental competence will be enhanced with an increase in family protective factors and decrease in family risk factors for delinquency and ATOD use; (2) family/parent/child activities will be enhanced and there will be a decrease in negative disciplining and communication strategies; and (3) child social competence will be enhanced and there will be an increase in protective factors for the prevention of delinquency and ATOD use.

II. Implementation Plan

The program used multiple program components and learning styles (lecture, role play, discussion, thought exercises) to present the curriculum. Homework assignments primarily consisted of parent/child “follow up activities.” Instruction was conveyed through a facilitative approach, and all instructors attend a five-day training to familiarize themselves with the process and the materials used in it. Three facilitators were trained in the process. For all but the pilot

group—in which there were two facilitators, each conducting one group—one facilitator taught all sessions.

The *Strengthening Multiethnic Families and Communities Program* consists of five components that are integrated throughout the Orientation and 12, 3.5-hour session curriculum. The components are as follows: cultural/spiritual, rites of passage, positive discipline, enhancing relationships, and community involvement.

The following details the twelve units of the training curriculum. The orientation session is not included because it provides an overview and introduction to the training and the focus of the program.

The twelve units address five key foci that run throughout the training: 1) cultural and/or spiritual focus; 2) enhancing relationships and violence prevention; 3) positive discipline to enhance child self-discipline; 4) rites of passage to make successful transition from childhood to adulthood; and 5) community involvement and community connectedness. The sessions specifically covered the following topics and activities:

- Cycle of life; special time with children; and personal and spiritual transition to adulthood
- Child's uniqueness; learning about consequences; positive attention for positive behavior; and physical and mental developmental transitions
- Interdependence; support; traditions; praise; and cultural and historical transition to adulthood
- Pride; power and equality; ignoring bad and praising good behavior; and violence risk factors
- Community speaker on violence in community and/or family; developing community vision
- Parent sharing; developing empathy; defining incentives; emotional developmental transition
- Parent sharing; managing anger; implementing incentive chart; and economic transition
- Parent sharing; solution building, confrontation and logical consequences; people as resources
- Parent sharing, family rules; "time out;" social transition; committing to plan of action in community
- Parent sharing; managing conflict; family contracts
- Group planned community speaker event; political transition
- Understanding spanking in the concept of discipline

Desired outcomes for this intervention are: decrease ATOD use; increased disapproval of ATOD use; increased perceived harm of ATOD use; decreased family conflict; increased family/parent/child interaction; decrease anger and violence towards children; decreased youth violence; increased family involvement in community; decrease parent isolation; decreased impact of peer pressure

Subsequent to the first cohort—which met twice a week and completed the training in 6.5 weeks—all cohorts met on a schedule of once a week. An additional session on sex education, which was not part of the curriculum but was requested by participants, was added as an additional session starting with the spring 2001 cohort. This session was held on a separate day of the week, after the completion of Unit 2.

Dosage. All sessions of the Strengthening Multiethnic Families and Communities curriculum were 3.2 hours in length with 15 to 20 minute break depending on if the class had a late start or not. A total of 41.6 hours would be a complete dosage of the training. All except the Summer 2000 Cohort met one day per week. The two sessions of the Summer 2000 cohort met for the same duration, one being held in the morning (8:30 am to noon) and the other in the evening (5:00 to 8:30 pm). Morning ones were from 10:15 am to 10:45 am and the evening ones were from 6:00 pm to 6:30 pm. The alumni group, another addition to the program, meets once a week on Fridays for three hours. Since this is voluntary, participants come when they can. Thirty-nine of the 56 graduates of the SMEFC program attend these sessions.

Average Cohort Dosage Levels per Activity

<i>Module</i>	<i>Summer 2000 Cohort1</i>	<i>Fall 2000 Cohort</i>	<i>Spring 2001 Cohort</i>	<i>Summer 2001 Cohort</i>
SMFC training	n.a.	3.15 hours	3.16 hours*	3.19 hours*

* includes extra sex education/sexual assault unit

III. Methodology

Phase I - Process Evaluation

Design and Assessment. During this phase the process evaluation focused on the consensus building and decision-making processes used for choosing and adapting a model for the target population. At the initiation of the project, staff and the evaluator were to develop forms to document procedures and characteristics of events that occurred.

Assessment Tools. Two instruments were to be used to document the implementation process: the staff time allocation log and the event log. The staff time allocation log was to record staff activities and document 1) strategies used to recruit Barrio Liaisons, resident participants, and community stakeholders; 2) utilization of CSAP dissemination materials; 3) implementation of all training activities; 4) barriers and facilitators to recruitment, information dissemination, and training; and 5) frequency and percentage of time allocation will be captured and reported on a monthly basis. The events log was to document consensus and decision-making criteria, events and outcomes that occur both in the process of selecting the model and within the group that review and adapt the model to the target group. Specifically, the form would document staff and Barrio Liaisons' observations with regard to: 1) training on group participation and rules; 2) who comes to the table and who is missing; 3) organizational strategies used to facilitate the process; 4) barriers and facilitators to consensus-building (participation in discussion, procedures); 5) information used to develop criteria for model selection (needs assessment); 6) criteria used to select the model; 7) criteria and methods used to adapt the model; and 8) socio-demographics of participants.

Program staff and evaluator would review the activity and events logs on a quarterly basis and report on the consensus-building and decision-making process to CSAP along with information on barriers and facilitators and lessons learned.

Modifications. Because of contingencies of time, staff reassignments, and personnel changes the staff log became a difficult and inflexible process to implement. In lieu of the log information was documented through the collection of written materials used in the training and in dissemination of information. Interview with the program director addressed the barriers and facilitators to recruitment. Implementation of training activities and barriers and facilitators to information dissemination and training were evaluated through the participant observation method. This method provides a means to observe people while keeping certain research questions and issues in mind all the while interacting with the group or population being observed. Rather than to look at the situation cold, the evaluator focuses on identifying specific issues and behaviors that, e.g., enable implementation of training activities.

In lieu of implementing the events log, participant observation and interviews with project director were conducted by the evaluator. Additional information was collected through the following quantitative and qualitative methods:

<i>Process Information</i>	<i>Evaluation Method</i>
Implementation of group participation and rules training	Participant observation
Level of participation	Attendance sign-in sheet
Organizational strategies used to facilitate process	Interviews
Barriers and facilitators to consensus-building	Participant observation
Information used to develop model selection criteria	Interviews
Criteria used to select model	Model Review Surveys; participant observation
Socio-demographics of participants	Survey form

Phase II - Process Evaluation

Design and assessment. The purpose of this phase of evaluation was to ensure that implementation of the chosen model adheres to the model design and that implementation was consistent across trainers. Once the model was selected, staff and evaluators would meet to determine the key components of the intervention, and develop fidelity checklists for each section of the model. During the training process, each trainer would be videotaped as they administer selected portions of the model. This would also provide trainers with the opportunity to practice implementation. Staff would then view the videotapes and fill out the fidelity checklists. The results would serve to pinpoint additional training needs, as well as to pilot the fidelity checklists. The checklists would then be revised as necessary to reflect the model's objectives.

During the implementation of the model, evaluator would observe 30 percent of the sessions with the target population. Selection of observed sessions would ensure each trainer is being observed to the same extent and observations are occurring across the span of model implementation. If problems occur in this stage of the implementation process, further training would be provided.

The fidelity checklists will document that implementation of the adapted model is accurate and consistent. In addition, it will provide information on the response of the target population and the appropriateness of the model. The fidelity checklists will also be useful in evaluating local training to other agencies that are disseminating the intervention to their communities.

During Phase II, program staff would continue to use the activity and count logs to document the recruitment and enrollment process, barriers and facilitators related to the intervention, program service costs, and effects of the adaptation to the original design on the target population.

Assessment Tools. Throughout the entire piloting of the program trainers were videotaped as they administered the program. Each taping was reviewed following the session, enabling the trainers to hone their skills and perfect the process. None of the cohorts after the initial one were videotaped.

Participant observation provided feedback for the facilitator in areas she might not otherwise see, e.g., interest level, time management, disruptions, and assignment of staff duties or need another interpretation of how participants are using and understanding the sessions. Data collection was done through note taking. All observation data was shared with the facilitator at the conclusion of each session. The strength of this approach was its immediacy, such that the facilitator had the evaluator's observations to work with for the subsequent session.

The fidelity checklist (see Appendix A) was developed by the evaluator to measure implementation of the program: participant information, specific information that must be transferred to participants, activity procedures, use of materials, and observations on participant response. There was a checklist for each of the 13 units of the training. The program coordinator reviewed the checklist and changes were made to reflect her input. The use of the checklist was only moderately successful because the evaluator was not present at every session and lessons overlapped from one session to another. For future use, it is recommended the facilitator have a copy of the checklists to refer to so that he or she can regularly 1) stay on target with the material and 2) have a ready means to document difficulties with the implementation of the program for debriefing with the evaluator.

The third component of the process evaluation was the group process form (structured and open-ended questions). At the conclusion of each session participants rate several aspects of the material. This process permitted the facilitator to review any problems participants may have with the material or with the environment. It also provided the evaluator with another on-going means to measure how the implementation was perceived. Process form findings are reviewed bi-monthly and available for the facilitator to review. The weekly process was measured using a form designed to elicit level of satisfaction and participant reaction as they relate to: (1) what in the session was attention getting and distracting, (2) what was most informative/interesting and least informative/interesting, (3) what aspects were helpful and not helpful, (4) what in the session was supportive and non-supportive, (5) what they found encouraged and/or discouraged sharing, and (6) how well they understood the concepts. This instrument was translated into Spanish.

This multifaceted approach to process provided a means for picking up overt and nuanced changes in the group and how the group uses the process. It also enabled the facilitator to reflect

on the dynamics and historical aspects of the group as they impacted how effectively the material was covered and how well it was absorbed and prioritized by participants.

Outcome Evaluation

Research Design

The outcome study uses a quasi-experimental design involving pretest, posttest, and six-month follow-up assessments of program participants. Baseline data (pretest) is obtained within the first two weeks of the intervention. Posttest is obtained at the conclusion of the intervention, and follow-up is obtained at 6 months post conclusion of the intervention. In addition, at the conclusion of the training and at the 6-month follow-up, *pláticas* (focus group) are held with at least 60 percent of the participants in each of the program groups to provide a less structured level of feedback.

Sampling Strategy

Population. The Barrio Families Project population consisted of Latino parents of 3-18 year old children who live in the Southside of Tucson, Arizona.

Sampling strategy. The spring and summer 2001 cohorts were largely recruited through a “snowball” sample of recommendations from past participants. This method has proven to be very effective in getting interested and committed parents into the program, yet it also has made for a somewhat homogenous population sample of primarily monolingual Spanish speakers whose level of acculturation is predominantly Mexican. An unanticipated benefit of this sampling is that it has expanded knowledge about the versatility of the program for new immigrants and border populations.

Sample size. A total of 56 families have successfully completed the program, *90 percent higher* than the targeted number of 30. Six-month follow-up assessments continued into June 2002. Because of both the fluidity of the population (many are newly arrived immigrants) the number of parents who have been successfully contacted for follow-up is substantially lower than for posttest. A total of 30 parents have been contacted for follow-up or approximately 54 percent of those who completed the program. The following table breaks down the sample by cohort.

TABLE 1: Sample Size by Cohort

	<i>Pretest (baseline)</i>	<i>Posttest</i>	<i>6-month Follow-up</i>
Summer 2000	10	11*	8
Fall 2000	21	19	12
Spring 2001	14	13	5
Summer 2001	15	13	5
TOTAL	61	56	30

*one parent who completed program did not complete pretest data

Measurement Specifications

The outcome evaluation uses several measurement tools. The pretest battery consists of a registration form (demographic and background information), an acculturation scale, and three survey instruments that can be self-administered or administered as a group. The Acculturation Scale for Mexican Americans assesses the level of acculturation of individual in the Mexican and American cultures; the Strengthening Multiethnic Families and Communities (SMFC) Parent Questionnaire measures community involvement, family/parent/child interaction, parent

perceived competence, and parent perceived behavior of child; ATOD assess first use, 30-day use, attitude toward adult ATOD use and attitude toward ATOD risk (adult GPRA in entirety); and CSAP Core Measures that assess through three separate scales, family conflict, family cohesion and parent-child affective quality.

The posttest battery consists of all of the above measurements with the exception of the demographic and acculturation instruments. The SMFC posttest questionnaire in addition to the aforementioned assessments includes satisfaction surveys on curriculum information and class process. The six-month follow-up battery is identical to the posttest assessments.

In addition to the above batteries, focus groups are held at the conclusion of the program (posttest) and at six-month follow-up. These meetings specifically address aspects of the program that are memorable for the participants; what they are able to use, in what context, and what effect the methods and philosophy have on the family; concerns and/or problems with the program and recommendations for addressing them; and how, if at all, they would like to expand their interaction with their group and the program. Questions are broadly worded to all participants to expand on their own and other's statements and to contextualize their responses (see Appendix A for sample of questions). The following pages contain the measurement matrix. It delineates which constructs are measured with each assessment tool. For those constructs consisting of more than one item, reliability analyses for the sample will be computed to determine whether or not the measures are reliable as a scale and will be compared to general population when available. For those scales that are found to have substantial inter-item reliability, a scale score will be constructed consisting of the average response for the items on the scale. Those constructs for which a scale does not appear to be the most reliable method of assessment will be interpreted on an item-by-item basis.

Because the SMFC pre/posttest instruments and specifically their subscales have not been tested for inter-item reliability this was performed for the different constructs measured by the instrument. For all but the community involvement subscale there was inter-item reliability. Community involvement was examined by item separately change was possible to discern.

Data Analysis Plan

The following delineates the components of the outcome analysis, including measurement matrix, data collection, and analysis.

OUTCOME MEASUREMENT MATRIX

SMF Parent Registration Form (PRF)
Cultural Adaptation Survey (CAS)
Acculturation Rating Scale for Mexican Americans (ARSMA)
Coalition Effectiveness Survey (CES)
CSAP CORE Measures (CORE)

CSAP/GPRA ATOD (GPRA)
SMFC Parent PRE Questionnaire (PRE)
SMFC Parent POST Questionnaire (POST)
Plácitas (FOCUS)

Construct	Instrument	Qualitative/ Quantitative	Measurement Reference Source	Reliability/ Validity	Standardized for Population
Demographics	PRF	quantitative	10 items from CSAP/CMHS	na	no
Family Living Conditions	GPRA	quantitative	from CMHS	na	no
Education and Employment	GPRA	quantitative	from CMHS	na	no
Cultural Cohesive Factors	CAS	quantitative qualitative	Traditional Mexican practices	no	Developed for this population
Acculturation	ARSMA	quantitative	20 items from Cuellar, Harris and Jasso (1980) Acculturation Rating Scale for Mexican Americans	Reliability: .87/ Validity demonstrated for measuring ethnicity, language and generation	Developed for Mexican Americans
Family Conflict	CORE	quantitative	3 items from Moos (1974) Family Conflict Scale	Reliability: .83/ High concurrent validity with drug and alcohol use and delinquency	Normed with different ethnic populations
Family Relations/Cohesion	CORE	quantitative	6 items from Gorman-Smith Family Relations/Cohesion Scale	Reliability: .69/ Being validated in ongoing studies	Being normed -- Specifically developed for ethnically diverse urban families
Positive Parental Reinforcement	CORE	quantitative	7 items from Parent/Child Affective Quality Scale	Reliability: .84-.86/ Validity: n/a	Used with and associated psychometric data: age group/ethnic group/ gender/geographic
Age of Parent First ATOD Use	GPRA	quantitative	4 items from National Household Survey on Substance Abuse	Reliability: n/a Validity: n/a	General population
Parent 30-day ATOD use	GPRA	quantitative	12 items from Monitoring the Future Survey	Reliability: n/a Validity: Self-reported substance use found to	General population of 8 th , 10 th , and 12 th grade students

				relate to other variables tapping attitudes and beliefs	
Parent Attitude Toward Adult ATOD Use	GPRA	quantitative	4 items from Monitoring the Future Survey/Disapproval of Drug Use	Reliability: n/a Validity: Disapproval of drug use found to negatively relate to use and onset of use	General population of 8 th , 10 th , and 12 th grade students
Parent Attitude Toward Risk (ATOD)	GPRA	quantitative	4 items from Monitoring the Future Survey/Perceived Harm	Reliability: n/a Validity: Perceived harm from substance use found to negatively relate to use and onset of use	General population of 8 th , 10 th , and 12 th grade students
Family/Parent/Child Interaction	PRE POST	quantitative	16 items from Strengthening Multiethnic Families Program Evaluation – Parental Behavior	Reliability: .79 for Mexican American sample/ Validity: Content validity demonstrated as questions are matched to the curriculum	Developed for use with multiethnic families
Community Involvement	PRE POST	quantitative	5 items from Strengthening Multiethnic Families Program Evaluation -- Community Activities with Children	Reliability: not calculated/ Validity: Content validity demonstrated as questions are matched to the curriculum	Developed for use with multiethnic families
Parent Competence	PRE POST	quantitative	10 items from Strengthening Multiethnic Families Program Evaluation -- How Parents Perceive Their Actions	Reliability: .79 for Mexican American sample/ Validity: Content validity demonstrated as questions are matched to the curriculum	Developed for use with multiethnic families
Child Competence	PRE POST	quantitative	8 items from Strengthening Multiethnic Families Program Evaluation -- How Parents See Child's Competence	Reliability: .74 for Mexican American sample/ Validity: Content validity demonstrated as questions are matched to the curriculum	Developed for use with multiethnic families
Knowledge Retention and Building	FOCUS	qualitative	Open-ended	na	na

Data collection methods

Data collection is designed such that the pretest is administered during the first and second session of the program. All assessments except for the acculturation scale were completed on the first meeting date. The program staff assisted the evaluation staff by orally administering the pretests (the administrator read the questions to the group and each person put her/his response on a separate answer page or her/his own copy of the instrument). Because issues of literacy arose after the first cohort this method was used to assure all participants fully understood the questions and were given ample opportunity to respond.

Prior to administration of pre-tests the consent form was read to all participants. Parents had to submit a signed consent form before any portion of the evaluation data was administered to them. The purpose of the assessments, the confidentiality policy, and the voluntary nature of their participation were read aloud to the participants. As all cohorts after the pilot were conducted completely in Spanish, this form too was read in Spanish.

Posttests were administered at the conclusion of the last training session in the same manner in which the pretests were. Follow-up assessments were conducted six months later, just prior to the six-month *plática* (focus group). If participants could not attend the focus group several attempts were made to contact them to complete the assessments on an individual basis. This was not always successful as participants moved, discontinued phone service, or had overriding personal issues that prevented them from completing the surveys.

Participants received compensation for attending the focus group but do not receive additional compensation for completing the assessments.

Procedures for data collection used the following procedure. All completion of the surveys participants placed completed forms into an envelope which was sealed and given directly to the evaluator, who was then responsible for managing and analyzing the data. All data is kept in a locked cabinet in the evaluation unit. To ensure confidentiality, all identifying material was stored in the evaluation unit in a locked cabinet separate from the completed surveys.

Data Analysis

Paired samples t-tests were used to measure change from time₁ (pretest) to time₂ (posttest), time₂ to time₃ (follow-up), and from time 1 to time3 to measure sustained change. All quantitative data is entered into SPSS (Statistical Program for the Social Sciences). An additional database was developed in ACCESS to enter more descriptive data (e.g., group process forms).

The focus group data was analyzed in terms of post program perceived outcomes and differences among the different cohorts. In addition, focus group data from posttest and follow-up is analyzed for changes in emphasis on different aspects of the program and fidelity to use of materials, techniques, and philosophy of the training. Qualitative analysis for the focus group was based on narrative and content analysis.

IV. Results

Process Findings

Four cohorts received the Strengthening Multiethnic Families and Communities training from the summer of 2000 to the summer of 2001. The summer 2000 and fall 2000 cohorts had two groups each. Spring

2001 and summer 2001 cohorts had only one group each. The summer 2000 cohort had one Spanish and one English-speaking group. The fall cohort had a session a morning and evening group to accommodate parents who worked. Retention was high for all groups. Table 1 provides the program completion rate by cohort.

Table 2. Barrio Families Retention Rate by Cohort

	<i>Started Program</i>	<i>Completed Program</i>	<i>% Completed</i>
Summer 2000	11	11	100.0
Fall 2000	21	19	90.5
Spring 2001	15	13	86.7
Summer 2001	15	13	86.7
Total	61	56	91.8

As evidenced by the above table, both recruitment and retention for the project was very high with an overall attrition rate of only 8.2 percent. Documented reasons for attrition were job related, illness in the family, and moving from the area. Two of the five individuals (both males) who withdrew from the program were spouses of parents who continued and completed the program. It is possible because there were so few men enrolled in the program there was some discomfort in their minority status in the group.

Participation in the program was measured by attendance, participant observation, and involvement in the Barrio Families Alumni Group. The following table provides a breakdown of average program attendance by cohort. The extra session held after Unit 2 was not included because all cohorts did not receive this added component.

Table 3. Attendance by Cohort

<i>Cohort</i>	<i>Average Attendance (%)</i>
Summer 2000	89.0
Fall 2000	
Morning Session	100.0
Evening Session	92.3
<i>Total Fall 2000</i>	94.7
Spring 2001	91.2
Summer 2001	93.3
Total	92.6

Level of involvement.

Summer 2000. The evaluator observed 35 percent of summer 2000 cohort. There were several key areas for the participants in the summer 2000 cohort. From within the framework of culture they drew on their Mexican and Mexican American heritage, traditions and customs, enjoying the opportunity to share different items and foods of their culture, e.g., *molé*, traditional dress, *nopalitos*, *burros*, traditional cooking tools, the *Virgen de Guadalupe's* image, *tortillas*, photos, *cebada* beverage, traditional Mexican chocolate and cookies. Within this context, they began to feel more comfortable with each other and to share with a more personal dimension. Because one group (Spanish speakers) was much larger than the other (English speakers) the level of interaction was greater in the former. Nevertheless, several activities were done together because both were administered at the same time at the same neighborhood center.

Related to traditions and customs, the group easily discussed culture and family and cultural and historical rites of passage. The parents talked about sensitive issues, specifically the experience of living in the United States and how that has affected their cultural and family values and rituals and about painful experiences of discrimination, oppression, sexism, and poverty in their families. They were able to connect these experiences to how their personal experiences have affected their children. Through this they began to understand the whole notion of modeling and their role in it.

With regard to implementation of specific aspects of the program, all parents reported good results from praising their children, and most had good results with the implementation of the attention chart.

In an effort to provide more information regarding topics the parents expressed concern about, LSSP staff trained and knowledgeable about the topics gave a one-hour presentation on sex education and HIV/AIDS prevention (which subsequently was expanded to a 3 hour session). The parents responded well to receiving this kind of information and noted how valuable and important this knowledge was to them.

In their work on the community, participants discussed what a community vision was and the importance of developing a dream about the community. They related their experiences to those of Martin Luther King, Gandhi, Cesar Chavez, and Nelson Mandela. This discussion inspired the group to formulate a collective dream about their community. This activity gave the parents a greater sense of connectedness and commitment. In a symbolic way this union was solidified in a handprint collage of their hands.

The emotional transition unit helped the parents to better understand the development process of their children. It also served as a vehicle for the group to become more united. One parent, who was not very involved with the grouping the beginning, and had even had a series of consecutive absences, took this as an opportunity to share her personal history with the group. She talked about her life—abuse, violence, and drug abuse—and talked about how motherhood allowed her to quit drugs. Significantly, she noted how the group had helped and supported her in this important transitional period in her life.

Similarly, participants gained more than resource information while completing the “community connections” activity. Noteworthy was how the monolingual Spanish speakers felt more empowered by the exercise. For example, one parent, very shy and only spoke Spanish, managed to call all five agencies assigned to her. In evaluating this activity, participants noted how making connections with different organizations in Tucson not only provided them with important information about community resources, but also worked to improve their self-esteem, particularly because they could get beyond the language barrier.

Directly related to implementation of tools, parents found the discussion of unique characteristics and temperament helped them implement the attention chart. Similarly, through their exploration and discussion of circles of support and interdependence they took a first step toward breaking down a process of isolation they were immersed in and began exploring opportunities and areas for support and resources inside of the group and outside, in their communities. They

also took to heart many other tools of the program, e.g., implementing the incentive chart, praising and giving their children more responsibility and controlling their own anger. In this regard they discussed how cultural/family/gender factors related to the expression of emotions in general and the expression of “anger” in particular. This discussion subsequently led to an analysis of cultural and gender factors and how they have developed within Mexican and Mexican-American families.

When the group discussed family and community violence, in addition to the information given in the curriculum, the facilitators addressed important cultural issues related to the topics of the session. Questions were incorporated about gender roles in Mexican and Mexican American families; the relationship between alcohol and male identity in Mexican and Mexican American cultures; alcohol and its relationship with Mexican and Mexican-American identity; how alcohol is used by the media; the power relations inside of Mexican and Mexican American families; and the influence of the culture in the development of gangs in Mexican or Mexican American neighborhoods in Tucson.

Fall 2000. The evaluator observed 75 percent of the Fall 2000 morning sessions and over 30 percent of the evening sessions. All sessions were conducted in Spanish. Because there was concern about the literacy level of the participants, all evaluation instruments were read to the participants. While this assisted many of the parents it did take some time away from the delivery of the program. There was only one participant who was a father (evening session). He was very quiet and kept close to his wife, even during the break when they would eat separate from the rest of the group. This cohort, both morning and evening was most unique in the severity of several of the parents economic conditions. While most were extremely active in the program and participated freely in the discussion, it appeared one or two were there primarily for the incentive.

Throughout the delivery of the program four factors stood out as key to the use and the success of the program: cultural competency, trust (*confianza*), respect for the participant and her or his life experience, and utilitarian approach of the program. From the Orientation and throughout the program the facilitator drew on the cultural emphasis of the model to elicit the personal experiences, values, and participants own experiences and how they have shaped their behaviors. Frequently, the parents used the format of the program to address serious issues in their past or current situations, which tended to draw time away from the curriculum. This occurred more in the evening section, in which significant personal problems often surfaced. The facilitator’s role for the participants expanded into trusted confidante and at times, social worker. They sought her out to tell her their problems. While this added considerably to the facilitator’s duties, it also enabled her to reach the participants in a way that a more detached instructor could not. To reach a balance, she subsequently reduced the amount of class time devoted to these issues and devoted more time to connecting the women to resources in the community. She also increased her office hours at this time. These adjustments allowed her to devote the necessary time to the curriculum during the sessions.

For the most part, participation was active. Attendance was high in both groups, with the morning group having perfect attendance. Evening participation was usually dominated by about a third of the class. Other differences reflected the level of incorporation of the processes of the

program into the family structure. On the whole, the morning group appeared to be able to accomplish this quicker than the evening section. This may have been because of the greater stability of the lives of the morning group as opposed to that of the evening group. Although, it should be noted that one single mother, living on less than \$5000 year, managed to incorporate several aspects of the program (most notably special time) and with the most success.

It was clear the logical presentation of the program and the tools for achieving desired goals also enhanced self-worth. The parents were particularly interested in learning about different temperaments and the importance of “praising.” While some mentioned time difficulties in maintaining “special time,” most commented on how much they and their children enjoyed it. Participants noted how they could now talk to their children without screaming. There were also comments that indicated difficulty of putting into practice some of the procedures. For example, one woman noted that she did not have enough rooms or quiet places to conduct “time out.” Another commented that she had difficulty instituting some of the practices because there were so many different people living in her house that consistency was difficult to maintain.

Another aspect of the program that reflected the cohesiveness of the respective groups was the process of contacting, choosing, and preparing for the community speaker event. This was taken very seriously and the research and discussion about the different community agencies were detailed. Each section prepared for their speaker differently: one group got dressed up and provided a formal atmosphere for the presenter, the other decorated the room with crepe paper and presented a more festive ambience. Each, however, kept their speakers long, peppering them with many detailed questions about the agencies they represented. The evening speaker ended up staying until the end of the session.

Community involvement was an important focus for the morning group—similar to that of the pilot group, which was eager to assist the program after its members had completed it. While all the parents took part in photographing their community, taking great care in writing their commentaries for the photograph album, the morning group went one step further in community involvement. During one session they decided they wanted to hold a *Las Posadas*, a Christmas processional through the community. The idea was introduced to the evening group and several of its members also decided to participate. Together, with the assistance of some of the pilot group members, they organized the event—food preparation, Mariachi, route, flyers, and assignment of roles. Over 100 people in the barrio participated in *Las Posadas*. They also were very involved with the guest speakers who came from C.E. Rose Center and Chicanos por la Causa. The preparation was quite elaborate although quite different from each other and they were active participants and listeners throughout, peppering the speakers with several questions. The speaker from Chicanos por la Causa stayed through the entire break time, talking to the parents throughout.

Spring 2001. The evaluator observed 77 percent of the sessions of the spring 2001 cohort. All sessions were conducted in Spanish. There was only one group for this cohort. The group being overwhelming composed of mothers; the discussions were predominantly from their focus. The one father participated very little, although always present. He would often be distracted or seek distraction with his young son or the other young children present. This group was more affluent than others, with a few of the parents having cell phones and often going out of the room to

answer a call. This was halted because of the level of distraction they produced. One of the most significant components for the spring 2001 cohort centered around modeling and the impact of their parents behavior on them and their behavior on their children. This session appeared to engage the participants the most and showed the least distractive behaviors. The parents discussed how and what it was like when they were growing up and how economic conditions impacted the amount of time their parents had to give them. Some also mentioned the harshness they experienced. This was particularly poignant when in the telling of her personal story on woman broke down while describing the difficulties she experienced in her youth. Others responded both in sympathy and in empathy as others had similar experiences. Another parent discussed positive aspects of her upbringing. Overall, the entire discussion served to bring the group together and to provide a perspective on how their behaviors become models for their children. The group was very involved in the discussion with participants being very attentive and providing a lot of back channeling to the different personal narratives. This was the first real point of connection for this group of participants.

The personal aspect of talking and conceptualizing around their own children and their behaviors proved to be a strong influence in how much the parents participated and how animated the discussion was. This personal venue for involvement was evident in many important areas of discussion. Specifically, the parents were very involved in looking at the unique characteristics of their children. They talked about the special aspects that define their children and their temperament and how much their own children differed from one another. This became so evident to them after this lesson that they began to see how they had to adjust to each child's individual needs. Similarly they were very engaged in the discussion on emotional outbursts.

Finally, the parents discussed in depth the difficulties surrounding their personal lives, how different it is for them than in Mexico and how both situations converge and often lead to confusion and difficulty in controlling and maintaining consistency in punishment.

As with previous groups the trust level increased steadily until at the end there was open expression of feelings and thoughts. One individual who was very quiet at the beginning became one of the most vocal participants by the end of the training, obviously trying many of the activities at home with her children. Unity, as with all the groups, solidified during the hand mural activity; and trust came, as with all groups, through their interactions with the facilitator who was always open to the participants and to whom they seemed to respond in kind. It soon became evident that the facilitator would have to set additional time during her office hours to deal with the many personal issues of the parents.

Summer 2001. The evaluator observed 39 percent of the summer 2001 cohort. The group was composed solely of mothers. As with other groups there were major emotional and financial issues facing these women. The participants were told up front there might be no monetary incentives for their participation. This did not deter participation. Overall, this group tended to be very involved in the program. There were some issues regarding providing some materials for two women who were primarily English speakers. They adjusted well and participated easily although appeared to see themselves as less in need of training than the others cohorts. This could have been because of their age (some participants older than other parents), their experience with other parenting programs, and/or their level of acculturation (one was U.S.

born). The only other factor impacting the group that was different than the others was the room in which the training was held—large, poor acoustics, with a noisy vending machine—and more children present throughout. Participants as with other groups separated themselves into cliques, although with this group it appeared to be more so. Specifically, it appeared the parents grouped themselves into three cliques based loosely by friendship and/or socioeconomics—two groups—and those with older children. Specifically, the parents with older children did not feel some of the methods/activities would work with their children, e.g., special time.

As noted for previous cohorts, reticence gradually gave way to increased involvement once topics drew on personal factors and the children. The modeling behavior topic was the first important move in this direction. Five of the 14 mothers present during that session indicated having alcoholic fathers caused them to either distrust or mistreat men because of their experiences as youths with them. Many of the participants also indicated having experienced excessive disciplining methods as youths.

Involvement was particularly strong in the session that dealt with “unique characteristics.” Parents were animated and talked openly at seeing their behaviors/traits mirrored in their children. This discussion proved to be a major ice breaker and they were forced to share this information with members of the group they would otherwise not converse.

Unlike other groups, this one was not very involved in the “dream community” exercise and took the opportunity of the facilitator’s note taking on their comments to chat among themselves. Similarly, this group was also not as involved in the hand mural.

Parents showed considerable interest in the preparation for and attention to the guest speaker from the C.E. Rose Center. The speaker’s presentation provided the parents with information on family welfare services available in the community. While most participants did not directly there was apparent interest in the topic and the call to volunteer. One parent noted that she had volunteered at the Rose Wellness Center and spoke of her experience in very positive terms, particularly for the support she received there and how she felt much less isolated after that experience.

Group Process

Participants used a Likert scale of 1-5, with 1 equal to “hardly at all” and 5 equal to “totally” to respond to each of the following questions.

- (1) During this session how much attention did you pay?
- (2) How interested were you with this session?
- (3) During this session, how much did you participate?
- (4) During this session, how much support did you feel you wanted to give to others in the group?
- (5) During this session, how much did you share about yourself with the others?
- (6) How much did you understand the concepts presented in this session?

For all participants there was a high level of attention, interest, and understanding throughout all units of the training. Findings also showed the responses for summer 2000, fall 2000 and spring 2001 were remarkably similar and high for participation, support, and sharing although slightly less then for the other three measures. This was noticeably lower for summer 2001 cohort which

also tended to score lower on all satisfaction levels. Overall, most differences between sessions varied slightly in level of satisfaction with the lowest rating given to unit 2 (personal uniqueness, consequences and attention charting, and physical and mental rites of passage) by all but the spring 2001 cohort. All cohorts but the summer 2001 cohort rated units 9 (committing to a plan of action, social rite of passage, family rule discussions, and “time out”) and 10 (phasing out the incentive chart, developing family contracts, and managing conflict) high.

Although never low, the summer 2001 cohort overall scored all aspects of interaction, interest and attention lower than any other cohort. For all but one unit (#5) the summer 2001 cohort scored indicated a lower level of attention for each unit than all cohorts combined. Of particular note were responses in the areas of participation, support to others, and sharing about themselves. This was most striking for sessions 6, 7, 10, and 11. For all areas, summer 2001 scores these areas lower (3.4-3.9 range) and, for all but “participation” for unit 7, it scores lower than all other cohorts. The following table presents these differences.

Table 4. Group process results for selected factors of involvement in program

	<i>Summer 2000 Cohort</i>	<i>Fall 2000 Cohort</i>	<i>Spring 2001 Cohort</i>	<i>Summer 2001 Cohort</i>
Session 6				
How much participate in session	4.0	3.9	4.2	3.4
How much support did you want to give others	4.0	4.2	4.5	3.9
How much share about self	4.4	4.1	4.2	3.1
Session 7				
How much participate in session	4.5	3.5	4.5	3.7
How much support did you want to give others	4.3	4.4	4.8	3.6
How much share about self	4.0	3.4	4.0	3.3
Session 10				
How much participate in session	4.3	4.2	4.3	3.6
How much support did you want to give others	4.3	4.7	4.7	3.8
How much share about self	4.0	4.5	4.3	3.8
Session 11				
How much participate in session	4.1	4.1	4.3	3.8
How much support did you want to give others	4.7	4.4	4.6	3.9
How much share about self	4.7	4.0	4.4	3.7

While perceived level of participation is frequently rated lower than other areas of involvement, the lower ratings in support and sharing for the summer 2001 cohort was more unusual. Participants provided some explanation as to why they rated as they did. The most frequent comment to the question: “what took your attention away?” particularly focused on the noise of others distracting them: “*Los niños hacen mucho ruido;*” “*mucho ruido con los niños;*” “*platicar con las compañeras.*” Part of the explanation for unit 7 may be due to the fact the facilitator had to leave for an appointment and her assistant took charge. Participants became more involved in conversation with each other than with the instructor. When the facilitator returned, participation was elicited from the participants and involvement returned.

Additional explanation for why this cohort rated satisfaction levels lower may be found in the following factors: high number of participants in the summer 2001 cohort who previously took parenting classes (46.2%), the poor acoustics in the room, and the number of parents who kept

their children in the room with them during the sessions. The latter two points may have increased discomfort and the experience with previous parenting classes may have enforced a belief based on previous knowledge—whether relevant or not—that they already knew this information. One woman commented to the evaluator that she thought it was “good for them”—meaning the other parents—but that she had already been through this.

Fidelity Checklist

The checklist, while developed to be used with the Spring 2001 cohort, never was fully implemented for a number of reasons. 1) The facilitator and evaluator met frequently to review the implementation process and any difficulties (e.g., length of time devoted to personal problems taking time away from curriculum) and worked out solutions to them. 2) It was not practical for the evaluator to use unless she was there every session. It would be a good tool to use for any inexperienced facilitator to help keep that person on track or an evaluator who would be observing all sessions. It would also be useful for reviewing videotaped sessions.

Staff Retention

Staff retention was excellent. There was no staff turnover. Once Ms. Leyla Flores was hired she stayed with the program to its conclusion. In addition, she was able to recruit two assistants, Estela Chavez and Marina Pallanes, from the summer 2000 cohort. They have proven to be valuable assets to the program. They provided assistance with program implementation, which at different points in time included babysitting, food preparation and set-up, and some instruction with the summer 2002. In addition, they have taken a major role in facilitating the graduate parents group (see below).

Outcome Findings

The following section provides descriptive and statistical analyses of the data for all four cohorts.

Sample

To date, 61 families enrolled in the Barrio Families Program and of that number, 56 have successfully completed the training. The following information pertains to those families that completed the program.

Demographics

The following table provides a demographic profile of the program participants.

Table 5. Demographics

	<i>Summer 2000</i>	<i>Fall 2000</i>	<i>Spring 2001</i>	<i>Summer 2001</i>
Number	11	19	13	13
Average Age (years)	31.5	34.7	36.6	34.7
Gender				
Women	100.0	94.7	92.3	100.0
Men	0.0	5.3	7.7	
Born Outside of U.S. (%)	70.0	100.0	92.3	84.6
Years in the U.S. for non-natives	6.5	8.2	2.08	9.1
Spanish 1st language (%)	100.0	100.0	92.3	84.6

	<i>Summer 2000</i>	<i>Fall 2000</i>	<i>Spring 2001</i>	<i>Summer 2001</i>
Average # Children (0-2)	1	1	1	<1
Average # Children (3-18)	2	2	2	2
Average # Adults in Household	2	2	2	2
Education 8 th grade and lower (%)	20.0	57.9	38.5	23.1
HH Income \$10,000/yr or less (%)	10.0	56.2	15.3	23.1

_missing data: Summer 2000 (3); Fall 2000 (4); Spring 2001 (1)

As evidenced by the above profile, participants in the program are primarily Spanish speakers who, except for summer 2001 cohort, are fairly new arrivals to the United States. Summer 2001 had two participants who are native to the U.S. and several individuals who have been in this country for ten years or more. Only a couple of women are fairly new arrivals to this country. The education level for all but the summer 2000 cohort is below both the State and the Southside target area levels of education. Similarly, over 30 percent of all participants responding to the income question live below the poverty level. But, as evidenced by the above demographic data, household income and education level varied considerably across the four cohorts.

Level of Acculturation.

The following is a data summary based on the results of analysis of the Acculturation Rating Scale for Mexican Americans (Cuellar and Jasso 1979). (See Appendix A for instrument) Using a scale of 1 – 5, with 1 = culturally Mexican, 2= between Mexican and bicultural, 3 = Bicultural, 4= between bicultural and Anglo, and 5 = Anglo, the following table gives a broad view of the level of acculturation for all four cohorts. In addition, data from three individual items (language spoken, association with outside community, and generation in this country) is included. For the item measuring language spoken, 1=Spanish only, 2= Mostly Spanish, some English, 3=Spanish and English equally, 4= Mostly English some Spanish; and 5=English only. For association with outside community the choices were: 1=almost exclusively Mexicans, Chicanos, Mexican Americans, 2=mostly Mexicans, Chicanos, Mexican Americans; 3=about equally Raza (Mexicans, Chicanos, Mexican Americans, Anglos and other ethnic groups); 4=mostly Anglos, African Americans, and other ethnic groups, and 5=almost exclusively Anglos, African Americans, and other ethnic groups. For generation in this country, the following choices were offered: 1=born in another country, 2=born in U.S. with either parents in Mexico or another country, 3=born in USA with grandparents born in another country, 4=parents and self born in U.S. with at least one grandparent born in Mexico or another country, and 5=self, parents, and grandparents all born in USA.

Table 6. Level of Acculturation by Cohort

	<i>Summer 2000</i> (n=10) mean (s.d.)	<i>Fall 2000</i> (n=15) mean (s.d.)	<i>Spring 2001</i> (n=9) mean (s.d.)	<i>Summer 2001</i> (n=13) mean (s.d.)
Language spoken	2.2 (.92)	1.47 (.83)	1.67 (.71)	1.77 (1.01)
Associate in the community	1.8 (.79) ^a	1.67 (.82)	1.0 (.0) ^a	1.64 (.67) ^b
Generation in U.S.	1.25 (.46)	1.0 (0)	1.33 (.5)	1.08 (.29) ^c
Overall level of acculturation	2.68 (.691)	2.13 (.319)	2.67 (.444)	1.66 (.525)

^a n=8; ^b n=11; ^c n=12

Overall, there was not considerable variation within the different cohorts, with the largest occurring in the area of language spoken, which reflects some bilingual speakers in the summer 2000 and 2001 cohorts. Yet, although the summer 2001 group had two U.S. born members in its

group who spoke primarily English, the group, was still the least acculturated into the Anglo culture. Overall, the entire sample population was not “bicultural” but more so than strictly “Mexican.” The program participants were not necessarily indicative of the majority of the Southside, which is predominantly bilingual, but does represent the growing number of newly arrived immigrants from Mexico that lives in the Southside.

Lifetime ATOD Use

Lifetime substance use is measured by whether or not the respondent has ever used alcohol, tobacco, or other drugs. This data is incomplete for a few reasons: 1) information requiring GPRA was given to evaluator after the first cohort was completed. Data for this cohort was obtained at follow-up. A couple of the participants in fall 2000 had considerable literacy problems that were discovered at a very late date. One of those participants never returned to complete the survey. Others never turned in surveys. The following represents an analysis of the available data for all four cohorts. Baseline (pretest) data was used unless otherwise specified.

Table 7. Lifetime Substance Use (% within cohorts)

	<i>Fall 2000 (n =19)</i>	<i>Spring 2001 (n = 13)</i>	<i>Summer 2001 (n = 13)</i>
Have ever smoked cigarettes	42.2	69.2	76.9
Have drunk alcohol	52.6	84.6	76.9
Have ever smoked marijuana	5.3	7.7	15.4
Have ever used other illegal drugs	5.3	0.0	7.7

When comparing baseline data for the spring and summer 2001 cohorts there appears to be little to no difference in the use of substances between the two cohorts. No comparisons between the two cohorts were found to be statistically significant.

There was some discrepancy in reporting between pre and posttest reports. In the spring 2001 cohort three additional parents said they drank alcohol than indicated in the pretest and one parent said she did not ever use marijuana or any other drug at posttest than previously indicated for pretest. There was also change in reporting for the summer 2001 cohort. Two additional parents indicated they had smoked cigarettes at posttest than at pretest; one parent indicated use of alcohol whereas before she had not; and one parent indicated no use of other drugs whereas before she had indicated use.

Initiation of ATOD Use.

Since data was not collected on ATOD use at baseline for the fall 2000 cohort because of lateness of finding out about the necessity of administering this tool and of procuring a translation of it, posttest data was used to compare fall 2000, spring 2001 and summer 2001 cohorts at this time point. Summer 2000 cohort is not included in this analysis because neither baseline nor posttest data was collected. The following table provides age and range of first use by each cohort for average age of first use of tobacco, alcohol, and other drugs.

Table 8. Age of first use of tobacco, alcohol and other drugs

	<i>Fall 2000</i>			<i>Spring 2001</i>			<i>Summer 2001</i>		
	N	Range (yrs)	Mean (s.d.)	N	Range	Mean (s.d.)	N	Range	Mean (s.d.)
Age first smoked a cigarette	8	14-30	18.9 (5.14)	9	13-21	16.6 (2.46)	9	13-27	17.2 (4.49)
Age first drank alcohol	10	9-30	19.1 (5.30)	11	14-23	19.2 (3.25)	10	13-30	18.1 (5.13)
Age first smoked marijuana	1	9	9	1	19	19	2	17-23	20 (4.24)
Age first used other drugs	1	9	9	0	-	-	1	18	18

As evidenced by the large standard deviation for all categories, there is considerable dispersion across the three cohorts. Considering this wide range, independent t-tests to measure difference between the cohorts show non-significant differences when comparing the means.

30-day Substance Use.

Because of the absence of baseline data from the summer 2000 and the fall 2000 cohorts, analysis for 30-day substance use will be limited to spring 2001 and summer 2001 data. There was very little reported substance use among spring 2001 and summer 2001 cohorts prior to pretest and following posttest and no significant change between those two measuring points. Using a paired samples t-test, there was no significant change in use patterns for both cohorts for both items (see Table 9). There was a slight increase in alcohol use overall. Yet, there was no change in the low use of cigarettes for the summer 2001 cohort and a reduction in use for the spring 2001 cohort, for an overall reduction in cigarette use for the two combined. There was no reported use of marijuana or any other drugs by either cohort for this period.

Table 9. Spring 2001 and summer 2001 cohort 30-day use of alcohol and cigarettes

	<i>Spring 2001 (n=13)</i>			<i>Summer 2001 (n=12)</i>			<i>Combined (n=25)</i>		
	Pre-Mean (s.d.)	Post-Mean (s.d.)	p-value	Pre-Mean (s.d.)	Post-Mean (s.d.)	p-value	Pre-Mean (s.d.)	Post-Mean (s.d.)	p-value
# days used alcohol	.46 (1.13)	.69 (1.18)	n.s	1.25 (2.01)	1.50 (2.81)	n.s	.84 (1.62)	1.08 (2.12)	n.s
used cigarettes (yes=1; no=0)	.31 (.48)	.15 (.38)	n.s	.25 (.45)	.25 (.45)	-*	.28 (.46)	.20 (.41)	n.s.

* cannot compute t because standard error of the difference is 0.

Knowledge and Attitudes about ATOD.

The average perceived risk of substance use was calculated using the responses to four items assessing perceived harm of alcohol, tobacco, and marijuana presented on pre- and posttests. The results of a paired samples t-test for each of the cohorts was not found to be significant for either the spring 2001 or summer 2001 cohorts. Nevertheless, there was significant change from pre- to posttest in one item for the spring 2001 cohort: a person risks harming themselves when they drink four alcoholic drinks in a day ($p < .028$).

The average attitude toward substance use was calculated using the responses to four items asking respondents how wrong they thought certain behaviors were was presented on pre- and posttests. The results of a paired sample t-test for spring 2001 approached significance ($p < .063$). Significant change ($p < .044$) was found for one item: "how wrong do you feel it is for adults to

drink one or two drinks a day.” The summer 2001 cohort showed no significant change on any specific item.

CSAP Core Measures on the Family

Three scales were used: Family Conflict (3-item) in which an increase was a positive change; Family Cohesion (6-items) in which a decrease was a positive change; and Parent-Child Affective Quality (7-items) in which an increase was a positive change. The following table presents the results of a paired samples t-test pre-posttest for analysis of each of the cohorts. Table 10 presents a detailed breakdown of these findings. Because follow-up data was too small for most cohorts, meaningful analysis by cohort was not possible. Follow-up data is presented for the entire project in Table 11. *p*-value is given for all statistically significant findings. Non-significant findings are abbreviated as “n.s.”

Table 10. Pre/Posttest Results for CSAP Core Measures on the Family

	<i>Pretest Mean</i>	<i>Posttest Mean</i>	<i>p-value</i>	<i>Change (+ or -)</i>
Summer 2000 Cohort				
Family Conflict	3.1481	3.0370	n.s.	+
Family Cohesion	1.6111	1.7778	n.s.	-
Parent-Child Affective Quality	5.8413	5.9683	n.s.	+
Fall 2000 Cohort				
Family Conflict	2.8222	3.2778	.037	+
Family Cohesion	1.7111	1.7333	n.s.	-
Parent-Child Affective Quality	4.4952	5.2135	.034	+
Spring 2001 Cohort				
Family Conflict	1.8462	2.7179	.005	+
Family Cohesion	2.1000	1.7179	.043	+
Parent-Child Affective Quality	4.7253	5.7802	.001	+
Summer 2001 Cohort				
Family Conflict	2.7436	3.0641	n.s.	+
Family Cohesion	2.0641	1.8205	n.s.	+
Parent-Child Affective Quality	5.1319	5.5824	.057*	+

* approaches significance

The following table represents the results for all four cohorts combined.

Table 11. All cohorts, pre post follow-up for CSAP Core Measures on the Family

	<i>Pretest Mean</i>	<i>Posttest Mean</i>	<i>p-value</i>	<i>Pretest Mean</i>	<i>Follow-up Mean</i>	<i>p-value</i>	<i>Change (+ or -)</i>
All cohorts							
Family Conflict	2.6067	3.0333	.003	2.6190	3.1190	.006	+
Family Cohesion	1.8860	1.7600	n.s.	1.8679	1.7286	n.s.	+
Parent-Child Affective Quality	4.9629	5.5926	.001	5.0510	5.8648	.001	+

Findings matching pretest and posttest show significant changes across all cohorts except the summer 2000 cohort. Various reasons why this first cohort showed the smallest level of change may be due to the fact that these parents were part of the consensus panel and may have felt more like they were testing the program than actually participating. Another, more significant

factor was that this group, while receiving the full dosage of the program, received it in a shortened time frame. Participants attended two sessions a week for 6.5 weeks which may not have given them enough time to process all the information and implement the activities with their children. The move to the more expanded format of 13 weeks has proven to be popular with the parents and appears to have significantly better results for implementation and retention. Interestingly, when this group was asked during a focus group about their use of the parent manual, these parents compared to all others, showed the least use.

Overall, of the three constructs measured, family cohesion appeared to be the most resistant to change. Of all the items in this construct, the only one that showed a significant change at follow-up ($p < .026$) when looking at all cohorts together was “listen even when I disagree”.

Strengthening Multiethnic Families and Communities (SMF) Parent Questionnaire

Four categories were defined on this questionnaire, three of which showed inter-item reliability (see measurement matrix): family/parent/child interactions, parent perceived competence; parents perception of child’s attitudes and behaviors. Table 12 presents the results for family/parent/child interactions, parent competence (Parent Focus); and 1st (oldest) child’s behaviors and attitudes (Child # 1). Because follow-up data was too small for most cohorts, meaningful analysis by cohort was not possible at follow-up. Follow-up data will be presented for the entire program as a whole in Table 13.

Table 12. Each Cohorts: Pre/posttest results for curriculum based measures

	<i>Pretest Mean</i>	<i>Posttest Mean</i>	<i>p-value</i>	<i>Change (+ or -)</i>
Summer 2000 Cohort				
Family/Parent/Child Interactions	3.7768	4.0982	.049	+
Parent Focus	3.8571	4.3857	.020	+
Child #1	4.4125	4.5625	n.s.	+
Child #2	4.1786	4.1071	n.s.	-
Fall 2000 Cohort				
Family/Parent/Child Interactions	3.2778	3.5058	.016	+
Parent Focus	3.1947	3.9263	.001	+
Child #1	3.6175	4.0395	.010	+
Child #2	3.8125	4.2375	n.s.	+
Spring 2001 Cohort				
Family/Parent/Child Interactions	3.5759	3.8176	n.s.	+
Parent Focus	3.5869	4.2343	.026	+
Child #1	3.9367	4.5795	.001	+
Child #2	3.7194	4.6224	.028	+
Summer 2001 Cohort				
Family/Parent/Child Interactions	3.5188	3.6000	n.s.	+
Parent Focus	3.4100	3.9692	.001	+
Child #1	3.7260	4.3942	.001	+
Child #2	3.7778	4.3333	n.s.	+

The following table represents the results for all four cohorts combined.

Table 13. All cohorts, pre post follow-up on curriculum based measures.

	<i>Pretest Mean</i>	<i>Posttest Mean</i>	<i>p-value</i>	<i>Pretest Mean</i>	<i>Follow-up Mean</i>	<i>p-value</i>	<i>Change (+ or -)</i>
All Cohorts							
Family/Parent/Child Interactions	3.4729	3.6852	.001	3.4911	3.9288	.001	+
Parent Focus	3.4297	4.0696	.001	3.4067	3.8790	.001	+
Child #1	3.8604	4.3373	.001	3.9063	4.2874	.006	+
Child #2	3.8601	4.3176	.002	3.9792	4.4720	n.s.	+

Overall, there were positive and statistically significant changes seen for all constructs. Regrettably, because of the fluidity of this population and the pressing economic conditions many live under, it was difficult to impossible to reach several participants at the six-month follow-up, thus giving this part of the analysis a somewhat incomplete picture. Nevertheless, from those who were recontacted—admittedly participants in a more stable condition—there was retention of many of the elements the curriculum of the training addressed. Results show particularly strong retention in the areas of family/parent/child interaction and parent self-efficacy.

Community involvement—not presented in the above analysis—was retained within certain areas. The two areas that showed significant increase in involvement from baseline to follow-up were participation in community activities ($p < .001$) and participation in youth activities ($p < .018$). This may be due to the role the graduate parents’ group played for many of the parents. Their steady involvement in this group and its role in several community events appears to have acted as an important catalyst for the parents to get active in both the community as a whole and youth activities, too. See below for an in-depth discussion of these areas (see Focus Groups). Two other areas of community involvement (in children’s education and in support network in times of need) increased, albeit not a significant increase, and one area of involvement (children participate in spiritual/religious activities) showed a slight decline.

Focus groups (*pláticas*)

A *plática*—discussion or chat—is the informal term used to describe the focus group format to participants in the Multi-ethnic Strengthening Families program. Seven *pláticas* were held over the course of the project, post implementation of program and at six-month follow-up for all cohorts except the summer 2000 cohort, which only had a follow-focus group due to personnel changes. The same set of broad questions guided the discussion for each post program implementation group and with slight variations, the follow-up meetings (see Appendix B). All sessions were held at the El Pueblo Neighborhood Center and were approximately 60-90 minutes in length. They were all conducted in Spanish and recorded. All but the summer 2001 cohort were reimbursed for their participation in the groups. Refreshments were served at all of the *pláticas*. The following provides a summary of the follow-up reports, with particular emphasis on long-term retention of methods, application and impact. Appendix B contains all seven completed reports.

Background

Follow-up focus groups were held with all four cohorts: summer 2000 (9 February 2001), fall 2000 cohort (24 September 2001), spring 2001 (24 April 2002), and summer 2001 (19 June 2002). Eight parents participated in the summer 2000 follow-up; six in the fall 2000 follow-up

and four each in the spring 2001 and summer 2001 follow-ups. All groups were held at El Pueblo Neighborhood Center, the same center in which the Barrio Families Project was held. Although staff tried to contact all of the parents that graduated the program some were unable to make it because of other commitments. Additionally, other parents could not be reached because they moved. Even though two of the follow-up groups were small, because of difficulty in being able to find a time they could accommodate everyone, it was decided to proceed with the focus group even considering the size of both sessions. All parents attending the focus groups were mothers. All but the summer 2001 cohort were very actively engaged in the focus group process. Although the summer 2001 cohort was not quite as involved and interactive, there was input by all present. All groups were conducted in Spanish and were audio taped. For two of the groups (spring and summer 2001) the session was held in a room with bad acoustics. This situation, in conjunction with children being present and parents speaking softly, made the summer 2001 tapes, in particular, difficult to hear. Notes were used along with the tapes to develop full transcripts of all the sessions. Incentives were only available for the summer and fall 2000 cohort focus groups. No incentives were provided for spring and summer 2001 groups because of lack of funds. The following covers the major points/questions discussed by the groups.

Most memorable aspect of the program

The groups identified markedly different aspects of the program. The focus for the fall 2000 and spring 2001 cohorts were better communication and openness. Better communication enabled the parents to build a relationship with their children and with other family members. One parent noted this not only impacts her relationship with her husband but with her siblings and friends. Another parent noted that by having greater patience with her children she has also opened the lines of communication between them: "I am more understanding and I listen to them." This greater communication also was expressed as having greater openness. Another parent had more confidence in her relationship with her son, such that she is now able to talk freely with him about school matters whereas before she did not feel she was could do this. One parent noted how being open and talking to her daughter produced the reciprocal effect of her daughter "talking more to us."

Related to communication is the increased trust that was observed. One parent noted how she could see this not only for herself and her daughter but also between her husband and her daughter. Another one talked about the trust she has with her daughter who rather than "ditch" a day came to her mother and told her why she didn't want to go to school. Based on that trust the mother, while allowing the daughter not to attend that day also required the girl to give a full, truthful explanation to her teacher regarding her absence. Finally, communication was also seen as having a lasting impact in providing clear instructions to their children. Many in the summer and fall 2000 cohorts found they communicated better, yelled less, and had more confidence in their ability to discipline. One parent noted she is not spanking her children because she can control her temper better.

The summer 2000 cohort, in particular, focused their comments around anger management and alternative ways of understanding their child's behaviors and their own histories. One woman made the connection between her anger, the pain she was carrying with her from her own childhood, and how she was transferring that to her children. Her realization, made possible by the program, enabled her not only to see the pattern but that she had to break it.

Focus group participants from the summer 2001 cohort were more focused on an ancillary activity they were involved in: V-Day, an anti-domestic violence day. The women were impressed with their own power and ability to be part of something like this all day event. Approximately 200 women participated in the march, of which 15 women were directly from the Barrio Families Project and many took part in the Spanish production of the *Vagina Monologues*.

Parts of the program that were particularly useful

Special time, which lays the groundwork for increasing communication, was seen as a particularly helpful component of the program for both cohorts. One woman's husband adopted the notion of special time into his regular activities. Now, whenever he goes someplace he takes one of his children with him "because he gets to talk to them so the children get to know him better and trust him." Another parent commented on how this increased attention has changed her husband's behavior and consequently her children's behavior. After telling him he should hug the children and tell them he loves them he started doing this and has found there has been a positive change in the children's behaviors. A couple of parents in the spring 2001 focus group noted how the trust they observed was evident in how their children became more helpful around the house. This led to a discussion of seeing and appreciating the rationale for rewarding their children for being helpful and taking on the responsibility of completing tasks around the house. One parent's husband is now very involved in implementing the incentive component of the program and finds he enjoys rewarding the children for their efforts.

Change in parents' and children's behaviors

As indicative of other comments, all cohorts found a major change was improved communication between their children and them. Particularly, they spoke of how their children told them about the behaviors of other children and what was going on in school. The fact they were telling them about their peers' behaviors was very significant for these parents because they felt this was an act of trust on their children's part to tell them what was going on. This was also seen as the children having a greater ability to differentiate between right and wrong. The parents saw changes in family behavior too, particularly with greater respect shown among family members. The parents noticed an increase in affection both by themselves and by their children, commenting on how their children would give them spontaneous hugs, whereas before they did not. When asked if their children's behaviors changed with the circumstance, they noted that in regard to behavior at home, their children were as observant of the rules set down for the house whether or not friends were present.

Parents also specified changes in themselves. Both participants in the fall 2000 and in the summer 2001 cohort commented on how they learned about the repercussions of their actions, particularly in regard to yelling and dealing with stress. For one group (fall 2000) the impact of how the cycle of violence can continue from one generation to the next had a profound impact on those present. Others found the training helped them to be more open with family and friends. When discussing this, they mentioned how they were able to impart what they learned to friends and family members. They felt more confident about what they had to suggest: "We don't know everything but when there are times we see mothers saying things or doing things they shouldn't, we tell them." The changes in their own families have been noticed, too. One parent noted how her mother felt a lot had changed in the household: "not anymore yelling or belts." The parents

also noted they now feel more confident in speaking up in groups than they did before the training.

Level of success of methods/activities

The parents found several components of the program to be successful. Specifically, “special time,” “praise,” and “incentive charts” were mentioned as significant activities. Special time for the summer 2001 cohort produced the most dramatic impact. One woman noted how her child, formerly very rebellious, is now “hugging and kissing her” and asking her about how her day was. For others, the greatest success was seen in implementing the incentive chart in her household. Parents in the summer 2000 cohort particularly cited using the incentive chart both to change behaviors in their children and themselves. One woman noted how her own consistent use of the charts produced a better response in her daughter. Another found it made her more aware of her own behavior of rewarding her child for nothing. She used to buy her son a toy because he wanted it; now she buys the toy only when he earns it. One woman used it as a measure of what chores were getting completed around the house. Another woman after introducing the chart to her noted that she was still not doing her chores. It was only after the family made a trip to Mexico when her daughter saw a little boy washing car windows for a living that her daughter not only saw the contrast with her own life and felt sympathy for the boy, but also saw the need to earn what she received. Following that experience the daughter agreed to use the chart at home.

Parent Manual

All cohorts, with the exception of the summer 2000 group, reported using the manual regularly. They feel it helps remind them of the methods and reasons for activities. Specifically, participants noted referring to it about information regarding “special time,” incentives,” and “ignore/praise.” A few parents used the manual to recommend the training to others. One parent even spoke to her child’s school counselor about the program and brought in the manual for her to review. The counselor, she noted, was particularly impressed with the “praise” component and has incorporated some of the program into her own work. The reason given by the Summer 2000 group for not using the manual was lack of time.

Participation in alumni group

The parents found the alumni group to be very useful because it helped them understand their own situations and conflicts better. They found meetings helped them to remember the class as well as to keep them abreast of important issues, e.g., immigration, sexuality, and health issues. Involvement in this group goes beyond reviewing the material, which while an aspect of the meetings appears to be of lesser importance to the parents than the sharing of information and fellowship. The importance of socialization, support, and learning through meeting and discussing issues were major reasons for several of the parents to attend regularly. In addition to all of these points, they felt the group was good for their self-esteem.

There was only once concern related to the alumni group: that there would be a strong leader to replace the facilitator who recently left LSSP. They felt having someone who will be able to keep them together and lead the program was critical to the survival of the group.

Alumni Group

The alumni group was formed after the summer and fall 2000 groups expressed interest in getting more involved in the community and in coming together for support/review session. Thirty-nine parents—all mothers—from the four cohorts regularly attend weekly meetings at the El Pueblo Neighborhood Center. During the 3.5 hours they plan activities, review material, received a protection against sexual assault training (3/15-6/28/2002) and provide support to each other. Attendance at these weekly meetings is approximately 12, ranging from 7 to 29. The members have taken part in all of the graduation ceremonies of participants as a way to welcome them into the group of graduates. For the past two years, with the assistance of Luz Southside Partnership, the parents have organized a *Posada en el Barrio* in December. At each event approximately 100 people participated in this Christmas processional through the streets of the community. The parents have also gotten involved in a more activist way in participating in a V-Day in supporting the end of violence against women march on 20 February 2002. They were part of the planning and some were active participants not only in the one-mile march, but also as participants in the *Vagina Monologues* (2/23/2002), which was sponsored by LSSP and other agencies in the Southside. In April 2002 the group took part in the *Día del Niño* celebration at El Pueblo Neighborhood Center. As part of their contribution to the event, the parents made necklaces, puppets, and bookmarks for the children. Currently, the group is working on developing a cooperative for parents who are in acute financial. In support of this they have conducted a rummage sale at a Luz sponsored *Cinco de Mayo* celebration and have been selling tamales. The group is currently working on its mission statement and goals for the cooperative.

V. Conclusion: Interplay between process and outcome evaluation

One of the most striking aspects of the project was the impact the program had on how the parents viewed themselves and their ability to affect a change in their own behavior and that of their children. This construct—parent focus—showed significant change across all cohorts and across time. This was evident not only through the quantitative analysis but in the qualitative data, too. Posttest data also shows significant changes in parent-child affective quality, family conflict and family cohesion as well as increases in community involvement, most notably in community activities and youth activities. Significant changes were also seen in parent competency and child's behaviors and attitudes. Overall, results were strongest for the fall 2000 and spring 2001 cohorts. While the summer 2000 cohort also showed improvement, the impact of the program was not as strong. As mentioned earlier, this may be a reflection of the shorter, more compact time frame in which the program was delivered to this cohort. The program's success appears to reflect not just the curriculum but also the additional components of cultural competence, charismatic and very competent facilitator, and the dedication of the parents to work with the training. Participants' commitment to the methods was evidenced by the extensive use of the parent manuals, a factor that was emphasized in focus group sessions with three of the four cohorts.

The project had a surprisingly high retention rate, 92 percent. The low drop out rate may reflect the manner in which friends recommend the program to each other. This snowball effect appears to be a very successful method for this type of program in this community. It also may be in large measure due to the charismatic nature of the facilitator whose empathetic nature resonated with the parents. Incentives, while important and not to be diminished in providing a significant draw to the program, proved not to be as critical as the value of the training to the parents. This

became evident when it was not clear whether or not there would be available funds for the summer 2001 cohort. They came with no promise of compensation.

While the program appears to have had a lesser impact on the summer 2001 cohort, even this group showed significant gains in several interactive aspects, most notably increases in their level of community involvement, losing their temper less and showing greater affection towards their children. The importance of these changes have also come out in the focus groups in which participants articulated examples from daily life in which they saw positive changes in themselves, their children and their communication—less anger, more support—with their children.

It also appears that while all the cohorts have differed in some respect from what they drew from the program, the summer 2001 reflects differences in a number of factors that show the subtle and not so subtle ways in which process factors come into play. Specifically, a large number (45%) of participants had taken a parenting class before. This led to some comparison and a feeling by a couple that they already knew certain things. Secondly, the room in which the training was delivered had very bad acoustics. This, in conjunction with many children present during the training and not going or staying with the babysitter, led to more distractions than usual. Thirdly, there was a greater use of assistants, which produced a little discontinuity in presentation style. Yet, while some or all these factors may impact how the program was received, the opposing factors of high attendance, punctuality in arrival at all meetings, and retention without monetary compensation speak to a strong commitment and the overarching resonance of the program.

Finally, the importance of the cultural relevance and competence of the instruction were among the most significant, non-programmatic components of the project. The participants were obviously comfortable, at ease, and had both complete confidence and trust in the facilitator and her ability to address and respect their concerns. Based on observation and focus group comments this element of cultural comfort enabled parents to share, learn and accept the program as a viable method to reduce and prevent violence in their children and in their families.

In conclusion, this project and the program it used proved to be a highly successful and effective method and training for addressing youth violence in the Mexican American community living in the Southside of Tucson, Arizona.

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