



## A MODEL OF PSYCHO-EDUCATIONAL INTERVENTION FOR THE ROMANIAN ADOLESCENTS IN THE SITUATION OF INCOMPLETE PARENTING

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### ABSTRACT

The present study is based on the studies conducted by Bonchis, Birle, Stan (2010) and Secui, Dindelegan, Roman (2010) which state that there are significant differences between the children with and incomplete parenting scenario due to their parents leaving to work and the children with both parents. The authors mention the necessity of an intervention program focusing on the social – emotional dimension, dimension on which the incomplete parenting situation has had an impact. The ten proposed activities carried on for three months included the following areas: self knowledge, social and emotional development. Two groups of adolescents were included in the intervention program. Significant results were found compared to control group. Implications of the study results are discussed.

**Keywords:** incomplete parenting, Romanian adolescents, psycho-educational intervention, social and emotional development

### INTRODUCTION

According to the paper on psycho-social development proposed by Erikson (1968), adolescence is a stage characterized by the dominance of the couple “identity versus role confusion” expressed by the clear conscience of their individuality. This will lead to confidence reinforcement, autonomy and initiative or to confusion of roles, identification with negative roles and the inclination towards delinquency.

Many psychologists continue to describe adolescence as a period of psychological turmoil (Conger, 1977 as cited in Birch, 2000). Erikson’s ideas are extended and deepened by Marcia (1966) who identifies four types of identity status among adolescents:

- Diffusion of identity, shown by the absence of commitment and by indecision on the important issues of life (professional choices, religion etc);
- Foreclose of identity, expressed in hesitant acceptance of the values of others;
- Moratorium, when individuals reassess their values and goals, but they find it difficult to complete them;



- Acquisition of identity, expressed in the resolution of crises, employment and career or religious option.

In the latter process, parents play a significant part (Rutter, 1985). A number of studies indicate that democratic, but severe parents have independent, self-confident adolescents with high self-esteem, compared with more authoritarian parents, who generate obedience, addiction, lack of confidence, etc.

In terms of social-emotional development of an adolescent, negative effects are produced when a parent shows indifference or, for one reason or another, they are missing (Verza & Verza, 2000). Another similar case is the incomplete parenting situation generated by the parent's leaving in order to work abroad. Observations made on these children reveal that a long absence of the father leads to effeminate conduct for boys and uncertainty in the way of conduct for girls. When the mother is not involved in control and cooperation, different forms appear such as: insecurity, increased aggressiveness, delinquent tendencies, irritability, anxiety, etc.

Self-control lies in one's ability to control emotions, desires, behaviour, to manage all these components. Maccoby (1980, apud Sroufe, 1992) emphasizes that self-control and self-management depend on a number of general skills including:

- The ability to inhibit actions that develop gradually, beginning at two years of age and stabilizing during adolescence;
- Delayed rewards in the presence of an attractive action;
- Tolerance to frustration, which involves developing coping strategies, from the simplest ones such as distraction, to the most complex ones;
- Self-control adjustment to the situation.

E. Maccoby (1980; apud Sroufe, 1992) notices that all the above mentioned issues would not be enough to gain self-control if children did not have the ability to adjust to a given situation.

The author places this skill in relation to ego-resiliency, which implies a certain flexibility of the ego. The most important part of self-control concerns inhibition and subtle differentiation of emotions in a socially acceptable manner.

A series of studies done by Calkins (1994) relate the following:

- success in relationships with others is provided in part by developing a more constructive way to manage one's emotional experiences;
- the group popularity increases only if the person is capable to establish clear signals about others' emotional states;
- positive expressiveness provides a better relating behavior than the negative one;
- social status, acceptance, approval of the group increase in the situations in which the child or young person more accurately interpret others' emotional messages;
- non-aggressive manner to adapt to anger makes someone more pleasant and successful as a leader.

When the self-control is present? Most authors put self-control activation in relation to pressures on the child or adolescent (Logue, 1995). In this way, in cases of "good pressure" that is competition, care for the environment and for their own judgments, the child or the adolescent is motivated,



inspired, which ensures the development of self-control. When, however, a "bad pressure" of non-competition, of damage of the very thoughts is exerted on these there is risk of loss of self-control. But there are also situations when the child or young person is free, is not competing with anybody, not even with himself, and then they may be poorly motivated, or better motivated.

Most research in this field reveals that self-control is more adaptive than impulsiveness, although more recent studies indicate that in certain situations, impulsivity is more adaptive, putting it in connection with the activation of fore-median areas of the cortex (Logue, 1995). Psychologists point out the opportunities that children/adolescents must have in order to discuss and explain their actions to their parents. These in turn must develop a sense of responsibility for their behavioral manifestations. But all of these are missing in situation of "incomplete parenting".

Self-control, like other aspects of behavior is influenced by a number of factors, which Petermann & Petermann (2006) grouped into the following categories:

- Biological factors (sex differences, prenatal risks, neurological functional disorders) mostly active during childhood;
- Psychological factors (difficult temperament, distorted processing of social-cognitive information /insufficient empathy);
- Social factors (poor supervision by parents, insufficient emotional support, negative practices of education, physical abuse and social rejection).

In other words as the child grows, the importance of the psycho-social factors is more obvious. It is true that a child's ability to cope with distress depends on innate temperamental qualities, but they are affected by the type of child support he receives from parents. Where this support is missing, such as the case of abused children, children living in broken families or when parents are missing, it is very likely that they develop emotional disturbances that may affect their self-control (Cicchetti, Ganiban, & Barnett, 1991).

Schaffer (2005) emphasizes that the wide environment in which the child is raised can be responsible for variations in self-control and emotional competence. These environmental influences, such as poverty can lead to anxiety states, agitation, impulsivity etc.

The purpose of this study is to highlight the effects of a psycho-educational intervention program on the level of self-esteem, the level of social anxiety and the level of irrationality of the adolescents in the situation of incomplete parenting, as a result of the departure of one or both parents to work abroad, compared with those of participants in the control group (teenagers with both parents at home).

## METHOD

### Research hypothesis

Hypothesis 1: The rational–emotional and behavioral educational program brings changes towards the increase of the adolescents' self-esteem and self-appreciation, adolescents that are in the situation of incomplete parenting.

Hypothesis 2: The rational–emotional and behavioral educational program brings changes towards the optimisation of the adolescents' social relations.



Hypothesis 3: The rational–emotional and behavioral educational program brings changes towards the reduction of the level of irrationality of the involved participants.

**Design:** repeated measures – with control group

### Participants

46 adolescents, aged 14-16, having one or both parents left to work abroad, were randomly split in two groups, 23 in the intervention group and the others 23 in the control group. The gender distribution was equal.

### Instruments

The following instruments will be used:

- A measure of self-esteem, in relation with peers (alpha Cronbach =.75), with family (alpha Cronbach =.86) and with school (alpha Cronbach =.84), consisting in 28 items, having the items from *Hare self-esteem scale* (Bruce R. Hare, 1985, apud Fischer, J. & Corcoran, K., 1994) as a base line in constructing the items;
- Child and Adolescent Scale of Irrationality, (CASI - Bernard and Laws, 1988, apud Trip, 2007). Trip (2007) presented the results of the validity study for this scale on Romanian population;
- Self- statement scale for the social interaction with others, is a measure of social anxiety, consisting in 23 items and two factors – positive and negative cognitions during social interactions. The items were generated on the same structure as the items from Social Interaction Self-Statement Test (Glass, Merluzzi, Biever și Larsen, 1982, apud Fischer, J. & Corcoran, K., 1994). Alpha Cronbach was calculated for the two subscales: .74 for positive cognitions and .86 for negative cognitions associated with social interactions;

### Procedure

The pretesting for both groups took place at the beginning of March of the current school year. The intervention for the experimental group took place throughout 10 weeks, once a week for one hour. The topics covered throughout the program are part of the program proposed by Roman (2010, in Bonchis, 2010).

## RESULTS

Data were collected and analyzed, using descriptive and inferential statistics. Data distributions were normal in population (conclusions after calculated Kolmogorov-Smirnov test) for the variables implied in the study.

*The impact of psycho-educational intervention on adolescents' level of self-esteem*

**Table 1. Means and standard deviations for the global score on the self-esteem in the pretest, post-test and follow-up.**

General self-esteem				
Moment	Group	m	s.d.	N
Pretest	Intervention	87,95	6,08	23



	Control	89,91	8,49	23
	Total	88,93	7,37	46
Posttest	Intervention	95,78	7,06	23
	Control	90,69	10,98	23
	Total	93,23	9,48	46
Follow-up	Intervention	95,43	9,38	23
	Control	91,60	11,49	23
	Total	93,52	10,55	46

F value for intervention is situated under the critical threshold [ $F(1,427;62,805)=5,949, p<.05$ ]. Therefore, for the global self-esteem, the training program brings significant statistical differences between the moments of evaluation.

*The impact of psycho-educational intervention on adolescents' level social anxiety*

**Table 2. Means and standard deviations for the *social relations* dimension in pretest, post-test and follow up.**

Social relations with peers				
Moment	Group	m	s.d.	N
Pretest	Intervention	28,52	7,97	23
	Control	28,56	7,89	23
	Total	28,54	7,84	46
Posttest	Intervention	26,82	7,65	23
	Control	32,52	8,19	23
	Total	29,67	8,35	46
Follow-up	Intervention	28,52	9,08	23
	Control	35,91	10,71	23
	Total	32,21	10,50	46

Significant differences were found between the three moments of testing as a result of the training program [ $F(1,674; 73,667)= 3,857, p<.05$ ]. The training program brings significant statistical modifications between the two groups [ $F(1,44)=4,721 p<.05$ ], but also in the interaction between the training and the group [ $F=4,031, p<.05$ ].

*The impact of psycho-educational intervention on adolescents' level of irrationality*

**Table 3. Means and standard deviations for the *LFT rules* in the pretest, post-test and follow-up.**

LFT rules				
Moment	Group	m	s.d.	N
Pretest	Intervention	21,65	4,33	23
	Control	20,26	7,70	23
	Total	20,95	6,21	46



Posttest	Intervention	14,91	2,37	23
	Control	20,82	7,14	23
	Total	17,86	6,05	46
Follow-up	Intervention	16,13	4,42	23
	Control	20,60	7,21	23
	Total	18,36	6,33	46

F value for intervention is statistically significant. Regarding the differences between the two groups  $F(1,44)=5.379$  with  $p<.05$ , and for the interaction between the moment of evaluation and the group an  $F=7.575$ ,  $p<.01$  was obtained.

**Table 4 Means and standard deviations for the global evaluation of the self in the pretest, post-test and follow-up.**

global evaluation of the self				
Moment	Group	m	s.d.	N
Pretest	Intervention	22,08	3,07	23
	Control	20,08	3,30	23
	Total	21,08	3,31	46
Posttest	Intervention	12,73	2,26	23
	Control	18,04	4,96	23
	Total	15,39	4,66	46
Follow-up	Intervention	14,30	3,22	23
	Control	20,73	6,03	23
	Total	17,52	5,78	46

Significant differences were found between the three moments of testing as a result of the training program [ $F(1,680; 73,898)= 36,468$ ,  $p<.01$ ]. For the differences between the two groups an  $F(1,44)=13,188$ ,  $p<.01$  was obtained.

**Table 5. Means and standard deviations for absolute demands for justice in the pretest, post-test and follow-up.**

Absolute demands for justice				
Moment	Group	m	s.d.	N
Pretest	Intervention	20,82	3,05	23
	Control	20,52	4,64	23
	Total	20,67	3,88	46
Posttest	Intervention	11,91	2,29	23
	Control	21,13	3,40	23
	Total	16,52	5,47	46
Follow-up	Intervention	13,21	2,62	23
	Control	22,65	3,57	23
	Total	17,93	5,68	46



Significant differences were found between the three moments of testing as a result of the training program [ $F(1,633; 71,858) = 25,080, p < .01$ ], but also in the case of interaction between the intervention and the group with  $F = 43,510$  with a significant threshold value lower than the critical  $p = 0.05$

**Table 6. Means and standard deviations for LFT related to work in the pretest, post-test and follow-up.**

LFT work				
Moment	Group	m	s.d.	N
Pretest	Intervention	15,65	2,65	23
	Control	16,13	4,18	23
	Total	15,89	3,47	46
Posttest	Intervention	8,52	1,53	23
	Control	17,04	3,15	23
	Total	12,78	4,95	46
Follow-up	Intervention	10,08	2,84	23
	Control	16,60	3,75	23
	Total	13,34	4,65	46

We obtained the  $F(1,360; 59,846) = 17,298, p < .01$  for the intervention, a value situated below the critical threshold. Analyzing the data for the effect of the group and for the interaction between the training and the group for the LFT work we obtained  $F(1,44) = 61,934, p < .01$  for the group's effect, and  $F = 27,656, p < .01$  value for the interaction between the training and group.

## CONCLUSION

The hypothesis were sustained and the main objective was met in its entirety. Therefore, the educational rational-emotional behavioral program proved to be efficient for assuring the growth of self-esteem and self-appreciation, the optimisation of social relations and for reducing the level of irrationality.

An important part in self-control development during childhood and adolescence is played by the environment. To adapt to its requirements and to cope with distress, one needs support from others. Where this misses, as is the case of “incomplete parenting“, the exposure to the risk of not developing self-control mechanism appears. Even if we accept the idea of multi-determination of behavior, we need to be aware that it is highly influenced by the relationships in which the child/adolescent is involved (Calkins, 1994).

Children and adolescents, who have behavioral and self-control problems manifest impulsivity, restlessness, anxiety, talk a lot, deliberately bully others etc.

Self-control can be developed only in an atmosphere of calm and mutual support from parents, of promoting desirable behavior, of formulating realistic expectations and use of a certain language which allows the understanding of the rules and social norms.





The results of this study indicate the necessity of the support at a social and emotional level that teenagers need from specialists. It is necessary to include them in psycho-educational counseling activities, which cover the issue of emotional control, of unconditional acceptance of self and others, of appropriate social and behavioral skills.

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