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Evaluation of the Better Parenting Programme in Jordan

Suha M. Al-Hassan^a and Jennifer E. Lansford^b

^a Queen Rania Faculty for Childhood, The Hashemite University, Zarqa, Jordan

^b Centre for Child and Family Policy, Duke University, Durham, NC, USA

Abstract

This study evaluates the Better Parenting Programme (BPP), which has been implemented nationally in Jordan to enhance parents' knowledge, attitudes, and behaviours related to caring for young children. Participants ($N = 337$, 94% female) were randomly assigned to an experimental group or a control group. The experimental group participated in the BPP; the control group did not. Before and after the BPP, all participants completed questionnaires to assess their knowledge regarding key areas of child development, activities with their children, discipline practices, and perceptions regarding behaviours that constitute child abuse and neglect. Over time, participants in the experimental group (but not the control group) improved on parenting knowledge, spending time playing and reading books with their children, using more explanations during the course of disciplining their child, and accurately perceiving behaviours that constitute child neglect. Results suggest modest beneficial effects of participation in the Better Parenting Programme.

Keywords

child development; intervention; Jordan; parenting

Introduction

Many programmes designed to enhance children's development have attempted to alter parents' attitudes and behaviours as the mechanism to effect change in children. The importance of parenting is documented in a large body of research detailing how parenting of young children is related to children's subsequent cognitive, behavioural, and socioemotional development (see Collins, Maccoby, Steinberg, Hetherington, & Bornstein, 2000; Evans & Jones, 2008), as well as how parents interact with other major socializing forces such as education systems to promote children's optimal development (Smit, Driessen, Slegers, & Teelken, 2008). Parenting that is supportive, proactive, responsive, and involved promotes children's positive adjustment (Pettit, Bates, & Dodge, 1997), whereas parenting that is neglectful, abusive, rejecting, and controlling predicts children's maladjustment (Crouch & Milner, 1993; English, 1998; Gershoff, 2002).

When parents are struggling to parent well, they are sometimes targeted for interventions designed to improve their parenting and, in turn, their children's adjustment. Yet even parents who are not noticeably struggling can benefit from gaining new knowledge and being part of a supportive network of other parents, as evidenced by the large number of parents who join voluntary groups such as Mothers of Preschoolers (www.mops.org) or Mothers and More (www.mothersandmore.org). The key goal of parenting programmes is to enhance parents' knowledge, attitudes, and practices in relation to caring for a child

*Corresponding author Suha M. Al-Hassan. suha-al@hu.edu.jo.

(Shannon, 2003). Optimal parenting includes a wide range of activities to ensure that children are cared for physically (e.g., providing nutritious food, health care, and adequate sleep routines), cognitively (e.g., offering opportunities to learn and use language), socially (e.g., responding to the child with consistent, loving care), and emotionally (e.g., supporting the child's sense of self-worth). Because these are key challenges in parents' ability to provide optimal care for their children, parenting programmes often seek to improve one or more of these aspects of caregiving (e.g., Baydar, Reid, & Webster-Stratton, 2003; Priddis, 2009).

In a systematic review and meta-analysis, Layzer, Goodson, Bernstein, and Price (2001) found that parenting programmes can have a positive impact on a range of outcomes for both parents (e.g., increased knowledge and efficacy in the parenting role, decreased stress) and children (e.g., improved behaviour and parent-child interactions). However, parenting behaviours sometimes differ across cultural and socioeconomic groups (Weis & Toolis, 2008). Given the importance of parents in promoting optimal child development and the success in other contexts of parenting programmes in promoting positive parenting and child adjustment, the Better Parenting Programme was designed to enhance parenting in Jordan.

The context of parenting in Jordan

Over 50% of the Jordanian population is under the age of eighteen, and almost 20% is under the age of eight (Department of Statistics, 2007). The national average of number of children per household is 5.6 (Department of Statistics, 2007). Only 35% of Jordanian children attend preschool, and less than 2% attend any form of daycare (Department of Statistics, 2007). Instead, the majority of children are cared for at home, primarily by their mothers. Over the past decade, Jordan has made remarkable achievements in the areas of child health, nutrition, and education (e.g., Al-Hassan, Obeidat, & Lansford, 2009; Al-Momani, Ihmeideh, & Abu Nada'h, 2008; Dababneh, Ihmeideh, & Al-Omari, 2009). Infant and under-five mortality rates reflect improvements in meeting the survival rights of Jordanian children and are now low (21 and 24 per 1,000, respectively, in 2007 compared to 33 and 40, respectively, in 1990; UNICEF, 2007). This success in promoting child survival has motivated the Jordanian government to focus more closely on child development and protection issues.

One major context for parenting lies in the emergence of a National Plan of Action in early childhood for the years 1993–2000, and the Jordanian Plan of Action for Children 2004–2013 (Al-Hassan, 2009). The vision set forth in these plans is to create a safe environment that develops the capabilities of children by supporting legislation, policies, and programmes that cater to the physical, mental, social, and emotional well-being of children. The National Plan of Action for Children aims at providing Jordanian children with the best possible start in life by promoting a healthy life, giving them access to basic, quality education, and providing them with ample opportunities to develop their individual capacities in a safe and supportive environment protected from abuse, exploitation, and violence. The specific objectives of the plan are to: (a) Provide a general framework and direction for action in all fields and sectors that concern children; (b) Strengthen cooperation and partnership between the public and private sectors for comprehensive planning based on full participation and joint responsibilities; (c) Reduce gender and geographical disparities by increasing access to quality services that guarantee a secure life for all children; (d) Provide a basis for research, monitoring and evaluation in all fields related to children; and (e) Attract local and international financing for the implementation of this Plan.

A major vehicle through which child development and protection have been promoted is the Better Parenting Programme (BPP), which was designed after a national Knowledge, Attitudes and Practices Survey conducted in 1996 revealed parents' knowledge gaps in

effective childrearing (Brown, 2000). For example, less than half of parents responded correctly to items regarding social and language development, and parents lacked sufficient knowledge about the importance of play and setting appropriate limits (Brown, 2000). The BPP has so far been implemented in more than 200 centres nationwide and was initially evaluated in 2000 (Brown, 2000). The 2000 evaluation commended the achievements of the BPP, in particular the level of co-ordination between the different parties and the low cost of reaching parents and their children, which amounted to only 3 US Dollars per child (Brown, 2000). An important recommendation was the need to expand the BPP scope to a more holistic early childhood approach, including protection of children from abuse and neglect (Brown, 2000). These recommendations were taken into consideration in the design of a revised BPP, which started in 2003. UNICEF and other key government and civil partners (the Ministries of Social Development, Education, and Health, Jordan River Foundation, Jordanian Hashemite Fund for Human Development, General Union of Voluntary Societies, Islamic Society Centre, Jordan Women's Union, Al-Farouq, Al-Wastieh, Mafrag, United Nations Relief and Work Agency) have supported a nationwide programme aimed at empowering parents and caregivers to provide a stimulating, loving, and protective environment at home, through equipping parents and caregivers with skills and information to enable them to promote the psychosocial, cognitive, and physical development of their children aged 0–8 years. The BPP takes a holistic perspective on children's growth and development, regarding children's growth and development as being supported within the context of the family, the community, and the nation (Al-Hassan, 2009).

Jordan's goals related to early child development emerge from research demonstrating that interventions that promote children's cognitive, behavioural, and socioemotional development can have beneficial effects on children's development, including their academic achievement, social relationships, and productivity into adulthood (Campbell, Ramey, Pungello, Sparling, & Miller-Johnson, 2002). In the long run, early interventions that prevent problems from arising can be less expensive than treatments that manage problems after they have occurred (Foster, Jones, & the Conduct Problems Prevention Research Group, 2006). Parenting programmes take a wide variety of forms (Lansford & Bornstein, 2007). For example, in a review of 40 parenting programmes in 33 countries, Lansford and Bornstein (2007) reported differences among programmes' service providers (e.g., social workers, teachers, health care workers), points of entry (e.g., homes, schools, community centres), and strategies for service delivery (e.g., parent education classes, media campaigns, social service referrals). The effectiveness of these diverse parenting programmes has rarely been rigorously evaluated. Given the resources being devoted to the BPP, it is important to evaluate whether the benefits of successful parenting programmes in other countries are being accomplished by the BPP in Jordan.

The present study

The present study sought to evaluate the effects of the Better Parenting Programme on parents' knowledge and behaviour in three domains. First, to what extent did parents obtain knowledge related to child development and parenting skills? Second, what changes in parents' activities, expressions of contentment, and discipline with children were directly related to the objectives of the programme? Third, did parents' perceptions of behaviours that would constitute child abuse or neglect change as a result of participation in the programme? These questions were addressed by comparing pre- and post-intervention questionnaires from a group randomly assigned to participate in the BPP with a group randomly assigned to participate in the BPP at a later date. We hypothesized that the group that participated in the BPP would improve more over time than the control group with respect to their knowledge related to child development and parenting, positive interactions

with their children, the use of less harsh forms of discipline, and perceptions regarding behaviours that constitute child abuse and neglect.

Method

Participants

A sample of parents and caregivers throughout Jordan was drawn to represent the three geographic regions in which the BPP is delivered, with 151 participants from the Northern region, 117 from the Middle region, and 69 from the Southern region. Participants heard about the BPP from charitable organizations, school principals, community centres, programme staff, and from the media. When they signed up to participate in the BPP, the participants were divided randomly into two equal groups. Half of the participants were randomised into the experimental group and asked to attend the BPP sessions. The other participants were randomised into the control group and were told that they would have the opportunity to attend the BPP sessions at a later date; they were asked to complete questionnaires at the same time as the participants randomised into the experimental group. When asked why they wanted to participate in the programme, 57% indicated that they wanted to help their children grow and develop, 19% of participants had been asked by their employer to participate, 8% joined the programme to meet other parents, and the remainder joined for other reasons.

The age distribution of the participants was as follows: 19% were younger than 20, 50% were between 20–35 years, 25% were between 36–50 years, and 5% were between 51–70 years. Because the BPP targeted children's primary caregivers, the large majority of participants were women (94%). Fifty-five percent of participants were married, 35% were single, 8% were widows, and 2% were divorced. Three percent of participants were illiterate, 5% had a basic elementary education, 17% had an upper elementary education, 30% had a high school education, 21% had a community college education, and 25% had a university education. Family income was less than 300 Jordanian dinars per month for 64% of the sample, was between 300–599 Jordanian dinars for 29% of the sample, and was more than 600 Jordanian dinars per month for 6% of the sample. Reflecting Jordanian women's low levels of participation in the paid work force, 63% of the participants did not work in paid jobs.

Procedure

A pre-questionnaire was completed by participants in both the experimental and control groups. The experimental group then participated in the BPP. The control group received no services during that time. Shortly after completing the BPP, the experimental group completed the post-questionnaire, as did the participants who had been randomised into the control group.

The BPP consisted of a series of lessons (comprising a total of 16 hours) that focused on specific areas of parenting knowledge, attitudes, and behaviours. The lessons were led by social workers, health workers, kindergarten teachers, and paraprofessionals who had been instructed in how to deliver the lessons by centralized trainers. The facilitator's manuals included session guides, printed booklets, flip charts, audio-visual materials, posters, parent activity sheets, and recommended take-home reading materials for participants. Local facilitators had the flexibility to use all or a subset of the lessons and to follow time schedules that worked best for the participants. Some facilitators implemented the programme over a consecutive 3 or 4 days, others conducted the training once a week for a month, and others conducted the training twice a week for two weeks.

Measures

The pre-questionnaire and post-questionnaire included the following items to assess parents' knowledge, activities, expressions of contentment with the child, discipline, and perceptions of abuse and neglect.

Parenting knowledge—Pre- and post-questionnaires were developed to administer before and after participation in the BPP based on the content of the BPP training manual. The questionnaires assessed knowledge of child development and parenting skills that were taught in the programme. After the questionnaires were developed by the evaluation team, they were given to a group of professionals and specialists in the fields of early childhood education and evaluation and measurement in order to validate the language clarity and validity. The feedback received was taken into consideration, and modifications were made to some items of the instrument to make them more suitable. The questionnaires were then pilot tested on a group of 21 men and women and determined to have acceptable validity and reliability.

Activities—To collect information on what participants do while spending time with their children, they were given a list of possible activities and asked to indicate how often they interact with their children in each activity (1 = never, 2 = once or twice a month, 3 = once a week, 4 = 2–3 times a week, 5 = almost daily). The activities were (1) playing; (2) talking and chatting; (3) reading stories; (4) going on social visits; (5) watching TV; and (6) studying and doing homework.

Expressions of contentment—Participants were asked how they express their contentment towards their children's behaviours that please them. On a 4-point scale (1 = never, 2 = rarely, 3 = sometimes, 4 = always), participants were asked to rate how often they use the following expressions of contentment with their children: (1) hugging; (2) giving a reward; (3) letting children do something they like; (4) taking children to a place they like; (5) thanking children in front of everybody; and (6) doing nothing.

Discipline—Two sets of questions were used to assess participants' methods of discipline used in dealing with their children's undesirable behaviour in general and in the specific hypothetical context of if the children do not behave well in a visit to a neighbor. Participants were asked to rate how often they deal, in general, with the undesirable behaviour of their children on a 4-point scale (1 = never, 2 = rarely, 3 = sometimes, 4 = always) in each of the following ways: (1) I yell and tell him/her to stop doing that; (2) I beat him/her; (3) I talk to him/her explaining in detail why what he/she did was wrong; (4) I ask him/her to apologize; (5) I take away something he/she likes; and (6) I call him/her names. Then participants were asked how they manage the misbehaviour of their children when they are visiting a neighbor. On a 4-point scale (1 = never, 2 = rarely, 3 = sometimes, 4 = always) participants rated each of the following discipline methods: (1) I ignore him/her and don't do anything; (2) I promise to give him/her what she likes if he/she behaves; (3) I ask him/her to immediately stop the misbehaviour; (4) I take him/her and leave; (5) I bring some toys to keep him/her busy; (6) I give him/her lots of sweets to keep him/her quiet; (7) I praise him/her when he/she behaves; (8) I show him/her things he/she can do; and (9) I beat him/her.

Perceptions of abuse and neglect—Participants were asked to select which of the following types of behaviours and situations they consider to be child abuse: (1) ignoring what the child wants; (2) neglecting the child when sick; (3) uncovering the child's private parts; (4) beating the child; (5) calling the child bad names; (6) spoiling the child and expressing love excessively; (7) allowing the child to work for money; and (8) denying

privileges when the child misbehaves. Similarly, participants were asked to select which of the following types of behaviours and situations they consider to be child neglect: (1) leaving the child alone at home; (2) having someone underage take care of the child; (3) sending the child to the nursery; (4) feeding the child less than three meals a day; (5) not buying the child new clothes and using clothes of elder siblings; (6) smoking while the child is present; and (7) spending vacations at home and not taking the child to parks or places outside the home.

Results

The experimental group (who attended the programme) was compared with the control group (who did not attend the programme) using paired samples *t*-tests. Before the programme, the experimental and control groups did not differ in knowledge on child development and parenting skills (means = 15.8 and 15.7, respectively). After the programme, the experimental group's score increased significantly to 17.0, whereas there was no significant increase in the control group's score to 16.1.

The frequency with which parents reported in engaging in each activity and expressing contentment with their children was compared for the pre- and post-questionnaires (see Table 1). For the control group, there were no significant changes in the reported frequency with which they engaged in each activity with their child. For the experimental group, participants reported spending significantly more time with their children playing and reading stories after attending the programme. Neither the control group nor the experimental group changed over time in their expressions of contentment with the child; both groups reported high levels of positive forms of expressing contentment at both time points.

As shown in Table 2, participants in both the control group and experimental group showed an increase in using positive discipline methods and a decrease in using negative discipline methods over time. Specifically, participants in both the experimental and control groups increased in taking away privileges, and decreased in beating the child and calling the child names. Participants in both groups also increased significantly in the undesired behaviour of yelling at the child. In addition, participants who attended the programme (but not those in the control group) increased significantly in explaining reasons to the child. On the items about discipline methods that would be used if the child misbehaved during a visit to a neighbor, participants in both the experimental group and control group decreased significantly on the items regarding the frequency with which they would ignore the child, give the child lots of sweets to keep him/her quiet, and beat the child (see Table 2). The experimental group also increased significantly on the positive item regarding showing the child things he/she can do.

Changes in participants' perceptions towards child abuse and neglect are shown in Table 3. As shown, no significant changes were found over time in perceptions of either the control group or experimental group in behaviours considered to be child abuse. However, a significantly greater percentage of the experimental group reported regarding leaving the child alone at home, having someone underage take care of the child, and not buying the child new clothes as neglect after attending the programme than before. Perceptions of the control group regarding behaviours considered child neglect did not change significantly over time.

Discussion

The findings provided modest support for the benefits of participating in the Better Parenting Programme. Over time, participants in the experimental group (but not the control group) improved on parenting knowledge, spending time playing and reading books with their children, using more explanations during the course of disciplining their child, and accurately perceiving behaviours that would constitute neglect. Because participants were randomly assigned to the intervention or control group, these differences between groups in change over time can more confidently be attributed to participation in the BPP. As in other parenting interventions (Layzer et al., 2001), the effects of the BPP were positive but small.

For several constructs assessed, participants in the control group as well as the experimental group showed improvements over time. For example, participants in both groups showed an increase in using positive discipline methods and a decrease in using negative discipline methods. This implies that, with the exception of using more explanations (which improved for the experimental group only) something besides participation in the BPP was responsible for changes in reported discipline strategies over time. It is possible that the process of completing the pre-questionnaire caused participants to reflect on their discipline practices and to attempt to change those they deemed to be less desirable. The control group consisted of individuals who were interested in attending a parenting programme so they were likely willing to improve their knowledge and practices; merely completing the pre-questionnaire may have alerted them to some parenting practices that they then reconsidered. It is also possible that participants in the control group interacted in community settings with participants in the experimental group and learned information being conveyed in the BPP from members of the experimental group. Most programmes designed to improve parenting have not been evaluated rigorously through random assignment to control and intervention groups (Lansford & Bornstein, 2007). The findings from the present study suggest that the benefits of such programmes may be overestimated if they are not compared to a randomly assigned control group that did not receive the intervention.

Even at the time of completing the pre-questionnaires, most participants in the experimental group and control group accurately identified behaviours that should be considered child neglect and abuse. This indicates that there is a high degree of community awareness regarding these issues, likely stemming from many sources such as the media. Many parents in both groups also were engaging in positive behaviours with their children. Thus, the BPP should be framed in terms of enhancing already positive parent-child relationships rather than as addressing deficits. In previous research, working with parents' strengths and providing support that fits their needs has been related to more positive outcomes for parenting programmes (Sanders, Markie-Dadds, & Turner, 2003).

One limitation of this study is the reliance on parents' self-reports as the only source of data. Future research could formally evaluate the reliability and validity of the parent self-report measure by comparing the parents' responses to behavioural ratings provided by spouses or independent observers and to self reports on other well-established measures. Although parents may be biased toward reporting benefits of the programme (Shaw, 2006), this concern is offset by the random assignment of participants to either the control group or experimental group, allowing a comparison over time of the self-reports of these two randomly assigned groups. Another limitation is that the post-questionnaires were administered immediately upon completion of the BPP. Future research should conduct follow-up assessments not just immediately after the BPP ends but also several months after participation to assess whether parents retained knowledge from the programme and still differed from parents who did not participate in the programme on key parenting attitudes and behaviours. It is possible that differences between the experimental and control groups

might even look more pronounced if they were assessed a period of several months after the programme. Many of the behaviours targeted for change in the course of the BPP are ones that would take time to implement on a routine basis. For example, if parents first became aware during the course of participating in the BPP of the importance of certain parenting practices, they may not yet have had time to implement that knowledge through changes in their behaviour immediately following the programme. Beneficial effects of interventions may not be noticeable immediately upon completion of the intervention (Whittingham, Sofronoff, Sheffield, & Sanders, 2009; Yoshikawa, 1994).

In addition to limitations in the evaluation, the programme itself had limitations as well. For example, local facilitators were given flexibility to implement the programme in a variety of ways. The goal was to enable the local facilitators to be as responsive as possible to local needs of participants. However, an unintended effect may have been more successful implementation of the programme in some sites than in others, with less consistency than would have been ideal. Future research experimentally manipulating key features of the program (e.g., timeframe for implementation, particular lessons offered) could determine the most effective combination of features so that future iterations of the Better Parenting Programme could implement these features consistently in all locations. Furthermore, future iterations of the BPP could offer more intensive services to at-risk families for whom the relatively brief, education-oriented focus of the current BPP may not be sufficient to meet their needs. More at-risk families often benefit from multimodal and long-term interventions (e.g., Campbell et al., 2002; Foster et al., 2006).

Given the current context in Jordan in which the government is promoting child development and protection issues (Al-Hassan et al., 2009), it makes sense to focus on improving parenting as a way of optimizing children's development. Because participants who were randomly assigned to participate in the Better Parenting Programme demonstrated modest improvements in parenting knowledge, spending time playing and reading books with their children, using more explanations during the course of disciplining their children, and perceiving particular behaviours as constituting child neglect compared to parents who were randomly assigned not to participate in the programme, one can conclude that the programme is contributing to the promotion of positive parenting in Jordan. Because the Better Parenting Programme has been implemented widely, even small effects within individual families may amount to large effects for the country as a whole.

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References

- Al-Hassan, S. Evaluation of the Better Parenting Program: A Study Conducted for UNICEF. Amman, Jordan: UNICEF; 2009.
- Al-Hassan SM, Obeidat OM, Lansford JE. Education reform and the quality of kindergartens in Jordan. *Early Child Development and Care*. 2009
- Al-Momani IA, Ihmeideh F, Abu Nada'h AM. Teaching reading in the early years: Exploring home and kindergarten relationships. *Early Child Development and Care*. 2008
- Baydar N, Reid MJ, Webster-Stratton C. The role of mental health factors and program engagement in the effectiveness of a preventive parenting program for Head Start mothers. *Child Development*. 2003; 74:1433–1453. [PubMed: 14552407]
- Brown J. Evaluation Report of the Better Parenting Project. Report prepared for UNICEF. 2000

- Campbell FA, Ramey CT, Pungello EP, Sparling J, Miller-Johnson S. Early childhood education: Young adult outcomes from the Abecedarian Project. *Applied Developmental Science*. 2002; 6:42–57.
- Collins WA, Maccoby EE, Steinberg L, Hetherington EM, Bornstein MH. Contemporary research on parenting: The case for nature and nurture. *American Psychologist*. 2000; 55:218–232. [PubMed: 10717969]
- Crouch JL, Milner JS. Effects of child neglect on children. *Criminal Justice and Behavior*. 1993; 20:49–65.
- Dababneh K, Ihmeideh FM, Al-Omari AA. Promoting kindergarten children's creativity in the classroom environment in Jordan. *Early Child Development and Care*. 2009
- Department of Statistics. Jordan in Figures. 2007. Retrieved from: http://www.dos.gov.jo/jorfig/2007/jor_f_e.htm
- English D. The extent and consequences of child maltreatment. *The Future of Children*. 1998; 8:39–53. [PubMed: 9675999]
- Evans R, Jones D. Men in caring, parenting and teaching: Exploring men's roles with young children. *Early Child Development and Care*. 2008; 178:659–664.
- Foster EM, Jones DE, the Conduct Problems Prevention Research Group. Can a costly intervention be cost-effective? An analysis of violence prevention. *Archives of General Psychiatry*. 2006; 63:1284–1291. [PubMed: 17088509]
- Gershoff ET. Corporal punishment by parents and associated child behaviors and experiences: A meta-analytic and theoretical review. *Psychological Bulletin*. 2002; 128:539–579. [PubMed: 12081081]
- Lansford, JE.; Bornstein, MH. Review of Parenting Programs in Developing Countries. New York: UNICEF; 2007.
- Layzer, JI.; Goodson, BD.; Bernstein, L.; Price, C. National Evaluation of Family Support Programs. Final Report. Volume A: The Meta-Analysis. Cambridge, MA: Abt Associates; 2001.
- Pettit GS, Bates JE, Dodge KA. Supportive parenting, ecological context, and children's adjustment: A seven-year longitudinal study. *Child Development*. 1997; 68:908–923.
- Priddis LE. Tuned in parenting and infant sleep patterns. *Early Child Development and Care*. 2009; 179:259–269.
- Sanders MR, Markie-Dadds C, Turner KMT. Theoretical, scientific and clinical foundations of the Triple P-Positive Parenting Program: A population approach to the promotion of parenting competence. *Parenting Research and Practice Monograph*. 2003; 1:1–24.
- Shannon, LC. Raleigh, NC: North Carolina State University Cooperative Extension Service; 2003. Best Practices for Parent Education: Programs Seeking to Prevent Child Abuse. Retrieved from <http://www.npen.org/pdfs/BestPra.pdf>
- Shaw, DS. Parenting programs and their impact on the social and emotional development of young children. In: Tremblay, RE.; Barr, RG.; De Peters, RV., editors. *Encyclopedia on early childhood development* [online]. Montreal, Quebec: Centre of Excellence for Early Childhood Development; 2006. p. 1-7. Retrieved from at: <http://www.child-encyclopedia.com/documents/ShawANGxp-Parenting.pdf>
- Smit F, Driessen G, Slegers P, Teelken C. Scrutinizing the balance: Parental care versus educational responsibilities in a changing society. *Early Child Development and Care*. 2008; 178:65–80.
- UNICEF. At a Glance: Jordan. 2007. Retrieved from http://www.unicef.org/infobycountry/jordan_statistics.html
- Weis R, Toolis EE. Parenting across cultural contexts in the USA: Assessing parenting behaviour in an ethnically and socioeconomically diverse sample. *Early Child Development and Care*. 2008
- Whittingham K, Sofronoff K, Sheffield J, Sanders MR. Stepping Stones Triple P: An RCT of a parenting program with parents of a child diagnosed with an autism spectrum disorder. *Journal of Abnormal Child Psychology*. 2009; 37:469–480. [PubMed: 19023654]
- Yoshikawa H. Prevention as cumulative protection: Effects of early family support and education on chronic delinquency and its risks. *Psychological Bulletin*. 1994; 115:28–54. [PubMed: 8310099]

Biographies

Suha M. Al-Hassan, PhD, is an Assistant Professor of early childhood and special education at the Queen Rania Faculty for Childhood at the Hashemite University, Jordan. Her research focuses on early identification of children with special needs and behaviour modification. In addition, she studies school readiness and quality of early childhood programmes in Jordan.

Jennifer E. Lansford, PhD, is Associate Research Professor at the Duke University Centre for Child and Family Policy, Durham, NC, USA. Her research focuses on how experiences with parents and peers affect the development of aggression and other behaviour problems in youth in diverse cultural contexts.

Table 1

Mean scores of activities and expressions of contentment

Activity or Behaviour	Experimental Group		Control Group	
	Before	After	Before	After
Activity				
Playing ^a	3.8	4.2*	4.2	4.3
Talking and chatting ^a	4.4	4.5	4.3	4.3
Reading stories ^a	2.9	3.5*	3.2	3.2
Taking child on social visits ^a	3.2	3.3	3.5	3.5
Watching TV ^a	4.5	4.6	4.4	4.4
Studying and doing homework ^a	4.3	4.5	4.2	4.2
Expressions of Contentment				
Hugging ^b	3.7	3.8	3.7	3.7
Giving a reward ^b	3.0	3.2	3.0	3.0
Letting child do something he/she likes ^b	3.4	3.5	3.4	3.3
Taking child to a place he/she likes ^b	3.3	3.3	3.1	3.1
Thanking child in front of everybody ^b	3.5	3.6	3.4	3.4
I do not do anything ^b	2.9	2.6	2.5	2.8

* Significant change in mean scores.

^a 5-point scale (1 = never, 5 = daily).

^b 4 point scale (1 = never, 4 = always).

Table 2

Mean scores of discipline

Discipline Behaviours	Experimental Group		Control Group	
	Before	After	Before	After
Discipline in General				
Yell and tell child to stop	1.8	2.9*	1.9	3.0*
Beat child	2.6	2.2*	2.6	2.2*
Explain why behaviour was wrong	3.6	3.8*	3.6	3.6
Ask child to apologize	3.2	3.3	3.2	3.3
Take away something child likes	2.4	2.7*	2.4	2.7*
Call child names	3.2	1.6*	3.3	1.5*
Discipline during Neighbor Visit				
Ignore child	3.1	2.0*	3.0	1.9*
Promise treat for good behaviour	3.4	3.4	3.4	3.5
Ask child to stop the misbehaviour	3.8	3.7	3.7	3.6
Take child and leave	2.4	2.5	2.4	2.5
Bring toys to keep child busy	2.3	2.2	2.3	2.3
Give sweets to keep child quiet	2.8	2.0*	2.6	2.1*
Praise child when he/she behaves	3.6	3.7	3.5	3.5
Show child things to do	3.1	3.4*	3.2	3.2
Beat child	3.0	1.7*	3.1	1.8*

* Significant change in mean scores.

All items were rated on 4-point scales (1 = never, 4 = always).

Table 3

Percent of participants perceiving behaviours as child abuse or neglect

Situation	Experimental Group		Control Group	
	Before	After	Before	After
Child Abuse				
Ignoring what the child wants	14%	10%	26%	22%
Neglecting the child when sick	99%	99%	97%	98%
Uncovering child's private parts	96%	97%	97%	97%
Beating the child	93%	93%	96%	98%
Calling the child bad names	97%	98%	97%	98%
Spoiling the child and expressing love excessively	73%	78%	59%	66%
Allowing child to work for money	92%	100%	87%	92%
Denying privileges when child misbehaves	40%	42%	45%	46%
Child Neglect				
Leaving child alone at home	87%	97% *	88%	94%
Having someone underage take care of child	86%	95% *	93%	95%
Sending child to the nursery	72%	79%	75%	75%
Feeding child less than three meals a day	25%	23%	21%	24%
Not buying child new clothes	73%	83% *	84%	82%
Smoking while child is around	96%	96%	97%	94%
Not taking child to places outside home	25%	22%	16%	17%

* Significant change in mean scores.