Measuring Parenting

Perinatal and Child Health Survey Strategy Initiative:

Project Status Report II

ML
MIDDLESEX-LONDON
**HEALTH
UNIT**

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For information, please contact

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Table of Contents

Acknowledgements

Summary

This "Project Status Report II" outlines the activities undertaken for the Perinatal and Child Health Survey Strategy Initiative from May 14 to July 15, 2002. It provides ongoing documentation of the development and use of the Rapid Risk Factor Surveillance System (RRFSS) to measure constructs related to parenting. This work was undertaken by the RRFSS Parenting Module Development Group[1] to fulfill, in part, our respective health unit's commitments to the Ontario Ministry of Health and Long- Term Care funding for the "Perinatal and Child Health Survey Strategies Project". The overall goal of this project is to build local capacity to develop a sustainable surveillance system that captures key indicators related to perinatal and child health. The deliverables since the last project report include:

- the continued use of local networks and provincial experts to increase health unit capacity for early years surveillance

- the collection of data related to "positive parenting"

- preliminary results from the first "wave" of data collected in May 2002

- the ongoing documentation of the development process in preparation for a "Feasibility Assessment Report" on the use of the RRFSS for monitoring population indicators related to parenting capacity.

Background

On December 13, 2001, the Ontario Ministry of Health and Long-Term Care announced the availability of funding to public health units for traditional survey initiatives that addressed information needs in support of Early Child Development. By May 2002, a small group of health units, primarily in southwestern Ontario, joined by Halton Region Health Department and facilitated by the Southwest Region Health Information Partnership (SRHIP) had developed a module for the existing Rapid Risk Factor Surveillance System to contribute to our local knowledge of parenting capacity. This module was based on pre-existing questions used on the National Longitudinal Survey of Children and Youth (NLSCY). The scales related to hostile/ineffective parenting had proven to be problematic on the RRFSS during pre-testing in April and were subsequently dropped. The final module consisted of:

- a group of instructions and questions to identify parents/ guardians as well as the eligible index child (under 12 years old, living in the household),

- a series of five questions which combine to assess positive parenting (See Appendix A),

- Four standard cognitive questions (See Appendix B).

In May 2002, two RRFSS participating health units, Middlesex-London and Windsor- Essex, began using the Parenting Module on their monthly RRFSS. Middlesex-London purchased an additional 2.5 minutes per month to accommodate the module, while Windsor-Essex incorporated the module within their allotted 20-minute interview time. Both health units agreed to incorporate the standard RRFSS "cognitive testing" questions into the module. These questions assess the respondents' reactions to the module's "understandability" (See Appendix B). It is the intention of both Middlesex-London Health Unit and Windsor-Essex County Health Unit to use the results to assess the module's feasibility for more widespread use among other participating RRFSS health units.

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Dissemination

On May 29, 2002, Iris Gutmanis (SRHIP) and Ruth Sanderson (MLHU) made a presentation on the development of the parenting module at Middlesex-London Health Unit's Research & Practice Symposium. The presentation was entitled, "Travelogue: The Adventures of Measuring Parenting Capacity". It summarized two key learnings from the development of the module:

- parenting questions may be context and survey-type specific – what worked in one situation (NLSCY) may not work in another (RRFSS)

- the gold-standard in monitoring parenting within the population has not been established; however the NLSCY questions are used extensively.

In addition to this presentation, the first progress report, " Measuring Parenting Capacity- Perinatal and Child Health Survey Strategy Initiative: Project Status Report", was made available to the public on the MLHU website: www.healthunit.com.

Learnings from the Survey

In May 2002, the Parenting Module was incorporated into the RRFSS by the survey house, Institute for Social Research (ISR) at York University. Feedback from the interview field staff on the parenting module for the first wave of data collection was positive. ISR provided some simple result tables to the Development Group on a special request although the May/June (Wave17) data set is not yet available to the health units.

Results for Middlesex- London and Windsor-Essex combined indicted that a slightly lower proportion of respondents than predicted were parents of children under 12 years of age. Prior to the collection of data it was estimated that approximately 30% of the RRFSS respondents would be parents/guardians of children under 12 years old. Approximately 27% of the sample of 199 adults had children under 12 years of age living in their household. Most adults that did not describe themselves as a parent indicated that they were at least partially responsible for raising children. The final sample of adults with responsibility for raising children under 12 years of age was 25%. Approximately 16% of adults went on to identify that the index child (child with the last

birthday) was under 6 years of age. Based on this lower estimation of 25% of the RRFSS respondents falling into our sampling frame – there will be approximately 300 respondents that will answer the parenting module each year.

Preliminary results from the cognitive testing were encouraging. Only 4% of respondents found the questions difficult to answer. A similar percentage had at least one question repeated in the section. This is considerably better than some other RRFSS modules where up to 20% of respondents have found them to be confusing. Furthermore only one question appears to have recorded any item non-response and even then it was less than 4% of respondents.

Questions directly related to positive parenting indicate that there was at least some of the expected variation in the results. Further analysis will be required when the record level dataset is delivered to calculate the derived variable. The Middlesex-London Health Unit has committed to developing a syntax file for the analysis of the Parenting Module and making this available to all RRFSS partners.

Although timing reports were not available, it appears that the module adds approximately 2.5 minutes on average to the total interview time. This is based on assessing the total interview length of the MLHU survey for the 100 respondents per wave prior to adding the questions and after adding the questions. Since less than a third of the respondents actually answered these questions, the actual length of the module for participating respondents might be as high as seven minutes. As a general guideline, approximately four questions can be asked each minute on the RRFSS. This module consists of 14 questions in total (5 entry, 5 positive- parenting scale and 4 cognitive testing.) Due to the cost per minute of the survey and the need to consider respondent burden, further work must be done to assess the length of the module.

Alternatives

Although the NLSCY questions were widely used on a large face-to-face population survey, some of the scales proved problematic on the RRFSS telephone survey. The Development Group agreed in May to investigate other parenting surveys and to consult parenting and survey experts on future directions in the hope that this would provide future direction for module development. On June 14, 2002, the Development Group met for the day at Middlesex-London Health Unit to consider their future directions. The day was facilitated by SRHIP and designed to help the Development Group carefully consider the idea of creating another parent related module to compliment the established module. Two major and distinct ideas were considered:

- a module related to parenting knowledge of early child development and/or

- a module related to parental knowledge of available supports and preferred supports.

In relationship to the parental knowledge of early child development, the Development Group invited Dr. Carol Crill-Russell, Vice-President of Research Programs, Invest in Kids Foundation to the meeting. She presented her research findings from "The Parent Poll", a national survey of parents of children under six. In January 1999, Invest in Kids sponsored this national survey, conducted by Market Facts Canada, of 1,645 households with at least one child under six. This included equivalent numbers of fathers and mothers, and a separate group of single mothers. The survey was self-completed by volunteers in a market panel survey. These are volunteers who agreed a priori to participate in market surveys and provided demographic data so that they would be assigned to an appropriate survey. Similar to our module the "Parent Poll" identified an index child to whom the questions would apply. Unlike our systematic selection of the child with the last birthday, the "Parent Poll" chose the youngest child in the house.

The "Parenting Poll" focused primarily on parenting knowledge: whether parents know about the importance of the first five years of life, the pivotal role parents play during that period and whether parents are confident of their ability to care for their young children. The items were not necessarily the "most important" construct in parenting knowledge but are those for which there is consensus within the child development field on the appropriate responses. The questions included a 12-item quiz, framed in a

true or false format but measured on a 10 point scale for the degree to which the parent felt the answer was true or false. This scale allowed them to deal with those respondents that might be guessing at the answer. Only those that rated "10" on the scale were considered to have answered "true". It also included the NLSCY positive parenting questions used on the RRFSS and even those NLSCY questions that had proven problematic and discarded for RRFSS. Furthermore, a series of questions were included to assess depression, family functioning, spousal conflict and time-stress. Among other things, the researchers concluded that the more knowledgeable parents were about child development, and the more confident they were in the parenting role, the more positive, less punitive and more effective were their interactions with their young children. The results suggested that there might be merit in measuring parenting knowledge as an indicator of parenting behavior. It is also consistent with the "Ontario Early Years Logic Model" which identifies that increased parenting knowledge and practices in area of ages and stages of child development as a short-term outcome lead to the longer term outcome of increased parenting capacity.

The feasibility of accruing a large enough sample of parents with children under six years of age on a general population health survey like RRFSS was questioned. As previously discussed, preliminary results from the RRFSS indicate that approximately 15% of households contacted could identify that the respondent was a parent/guardian of a child under six years of age. Dr. Crill-Russell indicated that a modified selection of questions from the "Parent Poll" are being used in Alberta on a sample of 165 parents at a cost of approximately $65,000. Invest in Kids intends to repeat the "Parent Poll" in the future. At that time they might consider buy-ins from health units or regions to increase the sample size for particular geographic areas. This may be one way to improve the availability of local parenting data without having to build a new infra-structure.

The "Ontario Early Years Logic Model" also identifies that improved parent/caregiver knowledge of available supports and services may lead to the longer term outcome of increased parenting capacity. Public health program staff that were present felt that this type of information might be more readily useable and amenable to change at the health unit level. Perth District Health Unit offered a survey that they had done as a template.

3

Current Developments

At the most recent meeting of the Development Group, Ruth Sanderson, MLHU, stepped down as the lead of the Parenting Module Development Group. Brenda Coleman of Elgin-St. Thomas agreed to champion further development of a RRFSS module related to available supports and services to parents and SRHIP agreed to continue to facilitate meetings of the Development Group.

Both the Middlesex-London Health Unit and the Windsor–Essex County Health Unit have confirmed their intention to continue asking the existing Parenting Module for the remainder of the year. Resources at Middlesex-London Health Unit will now be channeled into the analysis and interpretation of existing and pending RRFSS data related to children and parenting. Bernie Lueske, Data Analyst at MLHU, has built on the work of Hong Ge, now at the Simcoe County District Health Unit, and made some significant advances in automating the analysis of RRFSS locally. This knowledge will be combined with the development of the Parenting Module to ensure that a syntax file for the Parenting Module is available to all RRFSS partners when more data is released in the autumn.

Appendix A - Parenting Module May 2002

>st_parent< [allow int 1]

   [if HEALTH_UNIT eq <5> goto code_par]   [# London/Mid][# get this section]
   [if HEALTH_UNIT eq <20> goto code_par]   [# Essex/Windsor][# get this section]

>code_par< [allow int 2][store <0> in code_par]
      [store <1> in st_parent]--------------+ flag section started

      [if dc1 ne <1>][goto exit_parent][endif]-----------+ skip section
                                  | if no kids
      [if age0 is <> and age1_3 is <> and age4_11 is <>] |
       [goto exit_parent] |
       [endif]--+

      [add age0 to code_par]--------+ count number of children under 12
      [add age1_3 to code_par] |
      [add age4_11 to code_par]-----+

      [if code_par is <0> goto exit_parent] counter is zero so skip

      [if code_par is <1>]----------+ if only one child under 12,
       [if age0 ne <0>] | determine age of that child,
        [store age0 in par1] | then store age of that child
       [else] | in next sections age variable
       [if age1_3 ne <0>] |
        [store age1_3 in par1] |
       [else] |
       [if age4_11 ne <0>] |
        [store age4_11 in par1] |
     [endif all]------------------+

      [if code_par is <1>]----------+ count indicates one child under 12,
       [if par1 ne <>] | check that age item has been filled,
        [goto intro_par1] | proceed to single child intro
       [endif] |
      [endif]----------------------+

      [if code_par ge <2>]----------+ count indicates more than one one
       [goto intro_par2] | child under 12, goto select child
      [endif]----------------------+ intro

      [goto problems]---------------+ trap residual and send to problems
                        for debugging

>problems<

[bold][yellow]
Problems have ocurred, please write this information on cover sheet
and give to supervisor. Thanks.
[n][white]

5

age0........[fill age0]
age1_3......[fill age1_3]
age4_11.....[fill age4_11]

code_par....[fill code_par]
par1........[fill par1]

press enter to continue @

[@][nodata][goto exit_parent]

>intro_par1<

[r] Now some questions about parent and child relationships. Earlier you   [n]
[r] indicated there was one child LESS than 12 years old in your household.   [n]
[r] The next questions refer to that child.   [n]

     Press "Enter" to continue @

[@][nodata][goto KIDNAME]

>intro_par2<

[r] Now some questions about parent and child relationships. Earlier you   [n]
[r] indicated that there were [fill code_par] children LESS than 12 years old   [n]
[r] in your household. For the next questions I would like to talk to you about [n]
[r] the child who had the LAST birthday.   [n]

[bold][yellow]
   Interviewer, if twins take the one born last.
[n][white]

     Press "Enter" to continue @

[@][nodata]

>par1< [define <d><98>][define <r><99>]
     [# only asked if more than one child]

[r] And how old is this child?   [n]

[bold][yellow]
 Interviewer: If needed " The child with the LAST birthday".
[n][white]

     0-11 enter age

      d don't know   r refused

      @

[@] <0-11,d,r>

6

>intro_par3<

[r] To make it easy to refer to this child, can you tell me their first name or   [n]
[r] initial?   [n]

    1 provides name or initial
    5 does not provide name
    @ 1

[if intro_par3@1 is <1>]

[bold][yellow] Enter name or initial here, do NOT use // [n][white] @name

[endif]

[@1] <1>
  <5> [goto intro_par4]
[@name] [allow 15][goto KIDNAME]

>intro_par4< [if par1 ge <98> and intro_par3@1 is <5>]
    [goto exit_parent]
    [endif]

[r] That is OK, then I will refer to this child as the [fill par1] year old.   [n]

   Press "Enter" to continue @

[@][nodata]

>KIDNAME< [allow 15]
    [if code_par is <1>]
      [store <the child> in KIDNAME]
      [goto par2]
      [endif]
    [if intro_par3@name ne <>]
      [store intro_par3@name in KIDNAME]
      [goto par2]
      [endif]

>YOUR< [allow 4]
   [store <your> in YOUR]

>YEAROLD< [allow 8]
    [store <year old> in YEAROLD]

>FIXIT<   [make KIDNAME from YOUR < > par1 < > YEAROLD]

>par2< [#gh: added code 9]

[r] What is your relationship to [fill KIDNAME], are you a parent, step parent   [n]
[r] legal guardian, grand parent, brother, sister, or something else?   [n]

    1 parent
    2 step parent
    3 guardian
    4 grand parent
    5 brother/sister
    6 brother/sister R volunteers they have a role to play in raising child
    8 live-in-nanny other paid child care provider
    9 other relative (uncle, aunt, etc.)

    7 something else (specify)

    d don't know   r refused

    @

[@] <1,6> [goto par4]
   <2-4,9> [goto par3]
   <5,8,d,r> [goto exit_parent]
   <7> [specify][goto exit_parent]

>par3< [define <d><8>] [define <r><9>]

[r] Are you completely or partially responsible for raising [fill KIDNAME]?   [n]

[bold][yellow]
  Interviewer: ONLY if asked, a parent who has joint or partial custody & sees
  the child on a regular basis, even if every other weekend, code "yes."
[n][white]

    1 yes complete or partial responsibility
    5 no responsibility

    d don't know   r refused

    @

[@] <1> [goto par4]
   <5,d,r> [goto exit_parent]

>par4<

[r] The following questions have to do with things that [fill KIDNAME] does   [n]
[r] and ways you react to him/her. For each of the following please tell   [n]
[r] me if you do this many times each day, one or two times a day, a few   [n]
[r] times a week, about once a week or less, or never.   [n]

[r] First, how often do you praise [fill KIDNAME], by saying something like: [n]
[r] "Good for you!" or "What a nice thing you did!" or "That's good going!"   [n]
[r] Do you do this many times each day, one or two times a day, a few times   [n]
[r] a week, about once a week or less, or never?   [n]

    1 many times each day   (includes "all the time" do not read)
    2 one or two times a day
    3 a few times a week
    4 about once a week or less
    5 never

    d don't know   r refused
    @

[@] <1-5,d,r>

>par5<

[r] How often do you and [fill KIDNAME] talk or play with each other, focusing   [n]
[r] attention on each other for five minutes or more, just for fun?   [n]

[bold][cyan]
  Do you do this many times each day, one or two times a day, a few times
  a week, about once a week or less, or never?
[yellow]
  Interviewer: if required, "talk or play with each other" means spending
  time together talking, playing or spending time doing things in each other's
  company. "Just for fun" means having a fun time together. If R says they
  tend to do this with one or more of their children at the same time ask them
  to try to answer as best they can for the selected child.
[n][white]

    1 many times each day   (includes "all the time" do not read)
    2 one or two times a day
    3 a few times a week
    4 about once a week or less
    5 never

    d don't know   r refused
    @

[@] <1-5,d,r>

>par6<

[r] How often do you and [fill KIDNAME] laugh together?   [n]

[bold][cyan]
  Do you do this many times each day, one or two times a day, a few times
  a week, about once a week or less, or never?

[yellow]
   Interviewer: If required, "laugh together" means laughing togetheir at the
  same thing, or a situation makes both of you laugh together. If R says they
  tend to do this with one or more of their children at the same time ask them
  to try to answer as best they can for the selected child.
[n][white]

    1 many times each day   (includes "all the time" do not read)

  2 one or two times a day
  3 a few times a week
  4 about once a week or less
  5 never

  d don't know   r refused
  @

[@] <1-5,d,r>

>par7<

[r] How often do you do something special with [fill KIDNAME] that he/she enjoys? [n]

[bold][cyan]
  Do you do this many times each day, one or two times a day, a few times
  a week, about once a week or less, or never?

[yellow]
  Interviewer: if required, "something special" means "doing something EITHER
  you or the child think of as something special." If R says they tend to do
  this with one or more of their children at the same time ask them to try to
  answer as best they can for the selected child.
[n][white]

    1 many times each day   (includes "all the time" do not read)
    2 one or two times a day
    3 a few times a week
    4 about once a week or less
    5 never

    d don't know   r refused
    @

[@] <1-5,d,r>

>par8<

[if par1 lt <2>]
[r] How often do you play games with [fill KIDNAME]?   [n]
[else]
[r] How often do you play sports, hobbies, or games with [fill KIDNAME]?   [n]
[endif]

[bold][cyan]
  Do you do this many times each day, one or two times a day, a few times
  a week, about once a week or less, or never?

[yellow]
  Interviewer: If required, "reading together" may be considered as hobby.
  Video games, watching TV or videos together count, but R should try to
  answer as best they can for the selected child, not counting family time.
[n][white]

1 many times each day   (includes "all the time" do not read)
2 one or two times a day
3 a few times a week
4 about once a week or less
5 never

d don't know   r refused
@

[@] <1-5,d,r>

>ROUTE_COG4< [goto COG_FILL]

>exit_parent< [allow int 1][store <1> in exit_parent]

Appendix B - Cognitive Testing Questions May 2002

```
>COG_LOAD< [if HEALTH_UNIT is <5>]
        [store <parenting> in COG_FILL]
        [goto make_win1]
      [endif]
      [if HEALTH_UNIT is <20>]
        [store <parenting> in COG_FILL]
        [goto make_win1]
      [endif]
      [if RANDOM1 is <1>]
        [store <mosquitoes> in COG_FILL]
        [store <les vaccinations antigrippales> in F001]
      [endif]
      [if RANDOM1 is <2>]
        [store <pesticide use> in COG_FILL]
        [store <l'utilisation des pesticides> in F001]
      [endif]

>cog1< [use window <6>]
      [define <d><8>][define <r><9>]
```

[r]Did you find the last few questions about [fill COG_FILL] difficult to answer, confusing or unclear?[n]

[bold][yellow]
Interviewer: If appropriate explain to R that
we are asking this and the next questions to
obtain feedback from respondents to find out
if they understand the questions. While most
people have no problem with the question
meaning, we need to make sure this is true of
all types of respondents. [n][white]

```
      1  yes
      5  no

      d  don't know
      r  refused
      @
```

[@] <1> [goto cog2]
   <5,d,r> [goto END_COG]

```
>cog2<  [use window <6>]
```

[r]Which questions did you find difficult to answer, confusing ot unclear?[n]

```
      1  Enter text, end with //

      d  don't know
      r  refused
      @
```

[@] <1> [specify]
   <d,r>

>cog3< [define <d><98>][define <r><99>]
     [use window <6>]

[r]Can you tell me what made these questions difficult to answer, confusing or unclear?[n]

[bold][yellow]
Interviewer: If not obvious, please make
sure you determine which question(s) R is
referring to. [n][white]

     1 Enter text, end with //

     d don't know
     r refused
     @

[@] <1> [specify]
   <d,r>

>cog4<

[bold][yellow]
 Interviewer: Did you need to repeat any of the questions in this section?
[n][white]

     1 yes
     5 no

     d don't know
     r refused
     @

[@] <1> [goto cog4a]
   <5,d,r> [goto END_COG]

>cog4a<

[bold][yellow]
 Which ones did you need to repeat?
[n][white]

     1 Enter text, end with //

     @

[@] <1> [specify]
   <d,r>

>END_COG< [window 4 destroy]

[window 6 destroy]
[if HEALTH_UNIT is <5>][goto exit_parent][endif]
[if HEALTH_UNIT is <20>][goto exit_parent][endif]
[if RANDOM1 is <1>][goto exit_wnv1][endif]
[if RANDOM1 is <2>][goto ROUTE_COG3][endif]