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Understanding Attendance in a Community-Based Parenting Intervention for Immigrant Latino Families

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Abstract

Community-based participatory research (CBPR) can help increase the attendance in community programs. Padres Informados, Jovenes Preparados (PIJP) is a program that aims to prevent tobacco and other substance use among Latino youth by promoting positive parenting. Although the trial used CBPR approaches, attendance was inconsistent. In the present study, factors associated with attendance and nonattendance and recommendations to maximize participation were explored in 12 brief feedback discussions (BFDs) with participants and in 10 in-depth interviews (IDIs) with facilitators who delivered PIJP. Content analysis guided two pairs of researchers, who independently coded emerging themes and categories ($\kappa = .86$ for BFDs and .73 for IDIs). Data from BFDs and IDIs were merged and interpreted together. We grouped factors that positively affected participation into three categories: individual and family (e.g., motivation), program (e.g., offering food and childcare and having facilitators who are trusted), and research (e.g., having incentives). Barriers to participation were grouped into four categories: individual and family (e.g., family conflicts), sociocultural (e.g., community and cultural beliefs), program (e.g., fixed schedules), and research (e.g., recruitment procedures). Participants provided recommendations to address all types of barriers. Although PIJP used CBPR, complete satisfaction of community needs is difficult. Effective community programs must address participants' needs and preferences.

Keywords

attendance; participation; family; qualitative research; community-based participatory research

INTRODUCTION

Interventions that promote positive parenting practices and parent–youth relationships reduce smoking and other substance use (Kumpfer & Alvarado, 2003; Nation et al., 2003). These programs could have greater impact in Latinos because of their high regard for family (Almeida, Molnar, Kawachi, & Subramanian, 2009). One challenge for family-based programs is inconsistent attendance, limiting their impact (Bloomquist, August, Lee, Piehler, & Jensen, 2012; Coatsworth, Duncan, Pantin, & Szapocznik, 2006a).

An alternative to address this challenge is using community-based participatory research (CBPR). In CBPR, community members and researchers partner to develop and implement programs that address an important issue in the community (Minkler & Wallerstein, 2008). Essential principles of CBPR are the following: recognizing community as a unit of identity, building on strengths and resources within the community, facilitating collaborative and equitable partnership in all research phases, promoting a colearning process, building local capacity, integrating research and action for the mutual benefit of partners, and focusing on problems of local relevance (Israel, Eng, Schulz, & Parker, 2005). An important goal of CBPR is to produce practical knowledge that is useful to people and communities. Therefore, programs using CBPR are expected to be more acceptable, appropriate, and culturally relevant, theoretically leading to greater use and a higher likelihood of long-term sustainability (Wallerstein & Duran, 2010).

PADRES INFORMADOS, JOVENES PREPARADOS

Padres Informados, Jovenes Preparados (PIJP) is a parenting intervention developed and delivered using CBPR approaches. It aims to improve parenting skills and parent–youth relationships in order to reduce smoking and other substance intentions among Latino youth (Allen et al., 2012). During 4 years, academic and community partners developed, piloted, and refined the program and delivery style to meet the needs and preferences of partnering organizations and community members. Community members engaged this project through a parent advisory board, focus groups, and active collaboration in the project conceptualization, curriculum design, and study implementation, including supporting participant recruitment, delivering the intervention, and helping with participant follow-up (Allen et al., 2012). Because the community was actively involved throughout the research process, high attendance and satisfaction were expected.

The program includes eight 2½ hours sessions for parents and four for youth and highlights values relevant to Latinos, such as trust, respect, and family orientation (Allen et al., 2012). Program length was limited to eight sessions due to perceptions of feasibility for community organizations. The trial assessing the utility of PIJP includes immigrant families with children between 10 and 14 years of age and is being implemented at seven community-based organizations identified as trusted by the local Latino community in a Midwestern state where Latino adolescents have the second highest cigarette smoking prevalence in the 9th and 12th grades (Minnesota Department of Health, 2014). Community recruiters recruited youth and at least one parent per family. Community facilitators (all Latino) were trained to deliver the curriculum building on participants' strengths and respecting the

particular experiences of participants. Community facilitators chose the timing of the intervention based on perceived accessibility for families. During program delivery, babysitting was offered, but transportation was not offered due to community partners' perception of priorities for sustainability. Participants received incentives only to compensate time spent in data collection (Allen et al., 2012).

After implementing PIJP in the first sites, inconsistent participation was noticed: 63% of families had high attendance (completed six or more sessions), while 26% had low attendance (participated in three or fewer sessions). Although these attendance rates are similar or higher than other studies evaluating universal family preventive interventions with Latinos (Atkins et al., 1990; Coatsworth et al., 2006a, 2006b; Díaz et al., 2006; Dillman Carpentier et al., 2007; Elder et al., 2002; Prado, Pantin, Schwartz, Lupei, & Szapocznik, 2006), the proportion of families with low participation is still significant. This is particularly important because PIJP used CBPR approaches, which through its processes are expected to identify and address potential barriers to participation. Therefore, understanding facilitators and barriers to attendance of PIJP is important.

LITERATURE REVIEW: FACTORS AFFECTING PARTICIPATION IN FAMILY-BASED PROGRAMS

Prior studies have identified multiple factors affecting participation in family-based interventions. Individual factors negatively related to attendance include lower income and education, being single or divorced, having one parent participating in the program, low motivation to participate, no experiences with group programs, parental distress, depression, substance use, and having lower levels of parenting skills (Atkins et al., 1990; Bloomquist et al., 2012; Coatsworth et al., 2006a, 2006b; Díaz et al., 2006; Prado et al., 2006). Individuals with low income, multiple competing demands, and high levels of stress have less time and less physical and emotional resources to attend these programs (Bloomquist et al., 2012; Spoth, Redmond, Kahn, & Shin, 1997) and lower perceptions of susceptibility and severity of child problems (Gorman-Smith et al., 2002). Family factors associated with lower attendance include high levels of conflict, greater number of children, and participating with a male youth (Coatsworth et al., 2006b; Díaz et al., 2006). Parents with greater number of children value to a lesser degree the need of parenting education because of previous positive childrearing experiences and perceptions of parenting expertise. Their child's gender might affect parental risk perceptions (Spoth et al., 1997). In addition, study-related program and facilitator factors contribute to attendance. Providing incentives, transportation, and child care and scheduling the program according to participants' availability have been associated with greater participation (Dillman Carpentier et al., 2007; Haggerty, MacKenzie, Skinner, Harachi, & Catalano, 2006). Facilitators with similar ethnic and socioeconomic backgrounds as participants, and who are engaging in their delivery, report greater attendance (Bloomquist et al., 2012; Dumas, Moreland, Gitter, Pearl, & Nordstrom, 2008; Lee, August, Bloomquist, Mathy, & Realmuto, 2006; Prado et al., 2006), which could be explained because of better facilitator-participant alliance (Mendez, Carpenter, LaForett, & Cohen, 2009). Although some of these barriers have been described in programs for Latino families (Atkins et al., 1990; Coatsworth et al., 2006a, 2006b; Díaz et al., 2006; Dillman

Carpentier et al., 2007; Elder et al., 2002; Prado et al., 2006), to the best of our knowledge, no study has identified factors affecting attendance in trials evaluating family-based programs using CBPR. Thus, the purpose of this study was to uncover factors that positively and negatively affected participation in PIJP, from the perspectives of parents and facilitators, and to generate recommendations for future programs.

METHOD

Qualitative methods were used to gain broader and deeper understandings about factors related to attendance and nonattendance (Creswell, 2007). Parents participated in brief feedback discussions (BFDs) and facilitators in in-depth interviews (IDIs).

Participants

After completing the postintervention data collection session, parents enrolled in the intervention and control groups at the first four sites of the PIJP program were invited to participate in BFDs (average duration 14.7 minutes). Discussions included parents from both treatment conditions to avoid singling out participants in the data collection sessions. All invited parents accepted the invitation ($n = 76$), and 12 BFDs were conducted. The sociodemographic description of participating parents is presented in Table 1. Fifty-five percent were from the intervention group and attended six sessions on average (ranging from zero to eight). Most were mothers, who were married or cohabitating, from Mexico. Parent participating in the BFDs were similar to the participants in the complete PIJP sample in all sociodemographic characteristics (data not shown).

Facilitators delivering the PIJP program at the first four sites were invited through e-mail to participate in IDIs at their workplaces (average duration 48.1 minutes). Of the 11 facilitators, 10 responded. Facilitators were mostly women from diverse cultural and educational backgrounds and four participants recruited to deliver the program (Table 1).

Procedures

After explaining the purpose of the current study and obtaining consent, audio-recorded semistructured BFDs and IDIs were conducted in the participants' language of preference (all BFDs and eight IDIs were in Spanish). The PIJP community-university partnership determined that about 15 minutes for BFDs and 45 minutes for interviews were appropriate to minimize participant and facilitator burden.

Three questions guided the BFDs and IDIs: (1) What factors made people attend the program? (2) What issues might have come up that did not allow everyone to participate in the program? (3) What suggestions would you give us to make it more likely that parents will participate more in the future? Follow-ups and probes were used to identify specific themes, and as the BFDs and IDIs evolved, new questions were added to explore issues not included in the initial set of questions.

Once the BFDs and IDIs were analyzed, all parents attending BFDs at one site were invited to a session where the findings were presented and discussed (nine participated). Facilitators received a written copy of the results and were asked to review and comment (five returned

comments). Both parents and facilitators validated the study findings. The results were also presented and discussed within the PIJP partnership. All procedures were approved by the institutional review board of the academic partners' university and supervised by an external qualitative researcher.

Data Analysis

Audio-recordings were transcribed in their original languages and coded following the steps of content analysis (Weber, 1990). Two independent coders analyzed the BFDs and IDIs. Themes were determined to be coding units. Each coder read all the transcripts and inductively developed mutually exclusive codes from emerging themes. These themes were grouped into categories answering the three questions that guided the data collection. Once each coder had their proposed coding schema, consensus meetings were held to agree on common coding systems for BFDs and IDIs. Then, parts of the texts were coded to assess the reliability of the coders using the same coding schema. After this testing and fine refinement, the final coding system was established, and BFDs and IDIs were analyzed by two independent coders using NVivo 10 (QSR International, Melbourne, Victoria, Australia). Inter-coder reliability was determined ($\kappa = .86$ in BFDs and $.73$ in IDI), and disagreements were discussed until reaching total consensus on themes and categories. After the coding was complete, the themes and categories from the BFDs and IDIs were merged and findings triangulated (Creswell, 2007). Ongoing consultation meetings with a qualitative researcher external to PIJP ensured trustworthiness of the analysis. In addition, findings were presented to academic and community partners. This peer-debriefing and checking procedure was implemented to further ensure the trustworthiness of the data analysis (Morse, Barrett, Mayan, Olson, & Spiers, 2002).

RESULTS

Parent and facilitator responses were classified according the three main research questions: factors that positively affected participation, barriers to participation, and recommendations to improve participation. Quotations exemplifying the findings are presented in English and their Spanish versions are included in the appendix (those not in the appendix are from interviews in English).

Factors Positively Affecting Participation

Themes that positively affected participation were grouped into three categories: individual and family, program, and research factors (Table 2).

Individual and Family Factors—From parent and facilitator perspectives, several motivations affected attendance, including the desire to become better parents, avoid previous negative situations, and improve communication with their child. Parents wanted to facilitate their child's education and be more supportive and understanding. Parents also hoped to receive help for specific problems, to share their experiences, and to receive monetary compensation. Though facilitators identified that parents generally were more committed than the youth, in some cases the adolescents were the ones who encouraged their parents to participate. In addition, the motivation of some parents changed throughout

the program: Initially some attended to receive the economic compensation, but they became engaged as they participated.

Program Factors—Parents and facilitators reported that having a fun experience with the program promoted attendance. Issues leading to a positive experience were interacting and sharing, practicing the skills with their youth, and having facilitators who were warm and friendly, used understandable language, created a trusting and positive learning environment, and conveyed high expectations for participants' ability to improve their parenting practices. Additional themes related to program factors are presented in Table 2.

Factors Negatively Affecting Participation

Table 3 shows the identified themes and exemplifying quotations of barriers to participation. Four distinct categories emerged from the data, including individual and family, sociocultural, program, and research factors. Table 4 displays recommendations to address many of these issues.

Individual and Family Factors—Facilitators perceived that targeting youth aged 10 to 14 years, who were at different developmental stages, affected participation. Young adolescents had a hard time engaging in certain activities, while older adolescents were bored with others. Restricting the children's age-groups was recommended (Table 4).

Participants were living under difficult socioeconomic circumstances that affected their attendance. Parents had multiple commitments that competed with PIJP for their time, including working, taking care of children, managing households, social events, English classes, and school or church activities, among many others. Of these, work-related issues (e.g., frequent changes in schedules, working at multiple locations, among others) were very important, particularly for father participation. Balancing these commitments was especially hard for single parents.

Transportation was also important: Many participants did not have a car available to them, did not want to drive due to fear of not having a valid driver's license or driving on snow and ice, or experienced long waiting and transit times with public transportation. Helping participants solve transportation issues was recommended for future programs.

Sociocultural Factors—This category included two subcategories: community factors and cultural beliefs. Not being familiar with the parenting trainings and being a small community that faces multiple stressful situations were perceived as negatively affecting attendance (see quotation in Table 3).

Not taking commitments seriously and holding traditional gender roles were the two most salient cultural beliefs that were negatively associated with participation. Although respondents were reluctant to generalize across Latino communities, these themes appeared in all IDIs and most BFDs and parents and facilitators considered them common. Not taking commitments seriously was described as changing decisions quickly, frequently without notice (see quotation in Table 3). Holding traditional gender roles negatively affected participation because participants mentioned that fathers commonly view raising children to

be a mother's responsibility and dislike receiving advice about how to parent or how to solve problems in their families (see quotation in Table 3). In addition, facilitators mentioned that some mothers required their partner's consent to attend and depended on them for rides to/from the program. Finally, because mothers were frequently responsible for household chores, they were sometimes too busy or tired to attend. Recommendations to minimize the impact of these issues included asking parents to sign a written commitment and incorporating strategies about how mothers could discuss the program's content with their partners (see Table 4).

Program Factors—PIJP's schedules were a significant barrier. Some families had problems attending during particular periods of the year (summer or winter sessions), days of the week (weekday or weekend sessions), or times of the day (morning or evening sessions). Opinions about the content, length, and number of sessions varied. Some parents considered the content new and interesting, but for others, it was familiar and repetitive. In addition, for some participants, the duration of the program was too long (length and number of sessions), while others wanted more and longer sessions.

Most facilitators felt that youth needed more than four sessions, and they recommended expanding this component of PIJP. Additional program factors that were perceived as negatively affecting attendance are presented in Table 3.

Research Factors—This category grouped issues related to the PIJP trial. Some participants enrolled in the study knowing that they could not attend all sessions, or were not fully motivated. Sometimes recruiters felt rushed to recruit the necessary families, which caused them to invite people without considering their availability (see quotation in Table 3). In addition, facilitators perceived that recruiters and research staff doing data collection sometimes did not provide detailed information about the program. In addition, research requirements that could have negatively affected participation included asking participants' contact information, requiring weekly attendance, participating with their child, enrolling only one adolescent, and the potential randomization of relatives or friends to different treatment conditions. Recommendations to minimize these and other barriers are presented in Table 4.

DISCUSSION

Attendance in family-based programs is a challenge. This study uncovered several factors affecting attendance that could help practitioners and researchers in designing and implementing preventive programs, especially if using CBPR.

The PIJP partnership used CBPR to develop and implement a culturally relevant and acceptable parenting intervention that responds to an identified need of Latino communities living in a Midwestern state (Allen et al., 2012). By doing this, attendance has been similar or higher to other universal family prevention trials with Latino families (Coatsworth et al., 2006a; Díaz et al., 2006; Dillman Carpentier et al., 2007; Prado et al., 2006). Although this is encouraging, similar issues related to participation in other family-based programs at the individual, family, and program levels affected PIJP's attendance (Bloomquist et al., 2012;

Coatsworth et al., 2006a; Díaz et al., 2006; Dumas et al., 2008; Haggerty et al., 2006; Prado et al., 2006). All of these factors are relevant for successful programming and need to be carefully considered when designing and implementing any prevention program, including those using CBPR.

Despite community partnership in the development and implementation of PIJP, parents and facilitators identified sociocultural program and research factors that impeded participation. This finding is important because the participatory processes of CBPR aim to address and minimize these issues, stressing the need to pay close attention to the social and cultural contexts of participants and resources of community organizations (Minkler & Wallerstein, 2008; Wallerstein & Duran, 2010). PIJP partners were aware of many of the identified themes because they appeared in the focus groups conducted at the intervention design stage (e.g., experiencing traditional gender roles). Although these themes were incorporated throughout the program, the current findings highlight that these issues required even greater depth. Thoroughly prioritizing and addressing key needs and preferences of the community is difficult but is critical for program success (Minkler & Wallerstein, 2008; Wallerstein & Duran, 2010). Program developers must explore with detail the needs and preferences of potential participants and invest significant efforts in incorporating *all* the relevant issues into the program, ensuring that socioeconomic and cultural factors receive important attention. The identified recommendations can help future programs in becoming even more acceptable and culturally relevant for Latino families.

Future programs should also incorporate greater flexibility. This would allow accommodating to the diverse needs and preferences of participants regarding content priorities and length, learning styles, and schedules and to the multiple commitments and unexpected events that immigrants living under multiple stressful situations might experience. By offering multiple alternatives to participants, programs might achieve greater engagement and participation (August, Gewirtz, & Realmuto, 2010).

Finally, because of the many research-related issues affecting participation, people in contact with participants, including research staff and members of community organizations, must be carefully trained and supported during these critical stages (see quotation in Table 3). In addition, because randomization occurred at the family level, relatives, friends, and others who could have supported attendance were sometimes randomized to the control group, reducing their ability to provide transportation and other sources of support that could have increased attendance. Randomization mechanisms that take into account natural social clustering should be considered to optimize attendance in future programs.

Strengths of this study were using qualitative methods, including several procedures to ensure trustworthiness of the data, and including participants with high and low attendance rates, who were in the best position to report factors positively and negatively related to their participation, respectively. Most studies evaluating factors related to participation correlate baseline participant characteristics to their level of attendance (Bloomquist et al., 2012; Coatsworth et al., 2006a, 2006b; Haggerty et al., 2006; Lee et al., 2006; Prado et al., 2006). Having a qualitative approach allowed identifying several factors affecting participation that had had been described to less extent, especially themes in the sociocultural and research

categories, which are difficult to assess with quantitative approaches. Future studies exploring factors related to participation should incorporate qualitative methods.

The main limitation of this study was the brief duration of the feedback discussions. These were conducted to gain insights about positive issues that could be strengthened and about barriers to be minimized in the next sites where PIJP is implemented. These were held simultaneously to postintervention data collection sessions and were kept brief and focused on barriers and recommendations to minimize participant burden. Facilitator interviews were included to complement parents' perceptions, add depth, and triangulate their opinions, which added rigor to this study (Creswell, 2007). An additional limitation is that parents in this study came from the intervention and control groups. Because participants in the control group had not experienced PIJP (44.7%), they reported guesses about why others did or did not attend, rather than issues that they experienced. Triangulating parents' and facilitators' reports confirmed the findings. Finally, it is also important to acknowledge that Latino communities are heterogeneous, and therefore, the findings of this study might not be entirely generalizable to all of them. We encourage readers to evaluate how the presented findings fit the local context of their community before using them in their programming.

CONCLUSIONS

Using a qualitative approach, factors affecting attendance and nonattendance in a CBPR-based parenting intervention were identified, along with recommendations for future programs. Addressing barriers to participation is difficult even when significant participatory processes are implemented. Unless many of the needs and preferences of participants are addressed, it is likely that some people will not fully engage. Although some issues cannot be solved within the context of a preventive program, these issues should be identified in the planning phase and, when possible, embedded in the program. If programs cannot attend to most of the needs and preferences of participants, potential solutions and alternatives need to be considered in order to maximize benefit.

APPENDIX

Original Spanish Quotations From Focus Groups and Individual Interviews

Quotation 1 (q1). "Yo creo que el interés mas que nada ... si no tienes interés, pierdes el interés y no vienes." (BFD8)

q2. "Al principio yo venía por la tarjeta, pero ahora a mí no me importa porque yo he logrado tener una buena comunicación con mi hijo que es mejor que la tarjeta. Si nos dan la tarjeta bienvenida, pero sino, ni modo." (BFD4)

q3. "Me han tocado unos [jóvenes] que ellos están porque quieren y me ha pasado que los padres no se miran tan interesados y son los jovenes que en verdad quieren que la familia venga a esto ... Algunos padres están viniendo solo porque sus hijos quieren venir. Se nota porque los padres que no participan mucho y en mi clase hemos platicado y con los jóvenes, ese joven está participando mucho, o la joven está

participando mucho, como que ella es la quiere venir y agarrar más información y aprender diferentes formas de arreglar la situación y los padres no tanto.” (IDI5)

q4. “A mí lo que más me motiva es las pláticas con otros padres, porque así uno conoce a otras padres y sus experiencias. Por ejemplo muchas veces nos quedamos encerrados y no hablamos con otras personas sobre nuestros problemas, no expresamos lo que no pasa por vergüenza de que dirán. Al tener confianza compartimos con otros, sacando lo positivo de cada uno.” (BFD6)

q5. “Si ellos no se sienten en confianza, puede ser que venga la primera vez pero después no van a volver a venir.” (IDI4)

q6. “Entrevistador: ¿Crees que el contenido del Programa era atractivo para las familias? Facilitador: Oh, sí. Yo creo que, como decimos en mi país, sí. Dimos “como anillo al dedo.” Fue muy bueno. Yo creo que fue muy balanceado.” (IDI5)

q7. “Para mis niños fue un súper buen gancho [teniendo tarjetas de regalo], por eso no querían faltar.” (BFD1)

q8. “Yo el primer momento participe pero luego en el segundo no pude participar, por lo mismo yo soy padre y madre a la vez, y para uno solo es muy complicado las cosas, es muy difícil para una persona sola, a mí me gustaría participar pero realmente me es difícil. ... Cada quien tiene su vida, su familia, con nuestros hijos a mí se me hace difícil porque yo trabajo por mi propia cuenta, voy a un lado, a otro lado, no manejo, además estoy preocupada por mis hijos y así se va el tiempo. Claro, dejando todo puedo venir, pues no me alcanza y para llegar atrasada pues mejor no. Entonces voy a tratar de avanzar. Tengo tantas cosas que hacer: yo trabajo en una casa manteniendo y en otra y no me alcanza el tiempo.” (BFD2)

q9. “Se que había jóvenes en ese grupo de que habían tenido una de sus padres deportados. Sé, este ... que había ... umm ... abuso de alcohol. Sé que había violencia doméstica. Sé que había abuso de drogas. Sé que había, umm ... relaciones donde el hijo ya no hablaba o la hija ya no hablaba español y la mamá no hablaba inglés y era muy difícil la comunicación. Sé que había familias muy católicas, muy estrictas y una muchacha que ya no estaba segura si creía en Dios y esa era una gran fricción ... O sea, ¡había de todo ahí! ... y cuando uno está pasando por cualquiera de esas situaciones puede la cosa se puede encender, y puede ser de que digan ‘¡No, pues ya no vamos a hacer nada! Ya no vamos para allá!’ y ahí cada quien para su lado.” (IDI2) q10. “Yo creo que es un problema de que los Latinos, no sé cómo decirlo, estamos mal acostumbrados. Nos comprometemos con algo, y a la media hora ya no vamos.” (BFD6)

q11. “Yo creo que hay esposos que no les gusta venir, por ejemplo a mi esposo, el me dice: que vas a hacer allá? A puro perder el tiempo.” (BFD10)

q12. “Facilitador: Porque somos tan vulnerables, somos tan variables y muy débiles en los compromisos que hacemos. Entrevistador: Cuando tu dices ‘somos,’ ¿te refieres a los latinos? Facilitador: Si, y me incluyo. Y me incluyo porque fue algo que yo he ido aprendiendo con la cultura de acá, en que si decimos que vamos a ir, hagamos hasta lo imposible por ir. Pero como latinos pensamos, ‘Ah no, es que dije

que sí pero mejor llamo y digo que no,’ o por último, ni llamo y no voy. Es muy común.” (IDI1)

q13. “Muchos padres dicen a las mujeres: ‘ve tú, porque tu, tu eres la mama, tu eres la que está a cargo de la crianza de los muchachos, de los hijos, y yo soy el proveedor, solo traigo el dinero para que no falte nada en la casa.’ ... Por prejuicios, el hombre va a decir ‘no, mi familia está bien, no necesitamos eso, yo no necesito que un tercero me diga lo que tengo yo que hacer con mi familia.’” (IDI9)

q14. “Entrevistador: ¿es frecuente que no vengan los padres porque están en la casa viendo tele o haciendo cosas en su rato libre? Facilitador: Yo creo que es frecuente, porque salen temas donde dicen, ‘oh, my dad is just at home,’ y nosotros pensamos según la señora dice, ‘no es que mi marido está trabajando,’ pero ellos los descubren de que no estan trabajando, están ahí en la casa y no quiere venir.” (IDI5)

q15. “Yo al principio yo decía, ‘¡Chutica! A lo mejor no van a responder porque son ocho sesiones,’ y lo veía [programa] así como largo, pero al mismo tiempo cuando va transcurriendo el tiempo, las semanas y ellos están comprometidos, ellos mismos sacan la conclusion de que, ‘¡Ay fueron ocho sesiones y no las sentí!’; pero si no estás comprometido ... sí las sientes: ‘¡Ay, ocho sesiones y todavía me faltan cuatro!’” (IDI1)

q16. “A veces uno ya ha ido a programas y escucha lo mismo, o hay cosas que ya le han dado a uno y uno ya las sabe. Entonces uno piensa que es lo mismo y deja de ir.” (BFD12)

q17. “Yo creo que lo que se decía estaba bien, pero faltaba tiempo para hablar entre nosotras, compartir nuestras experiencias.” (BFD8)

q18. “La persona que quiere inscribir a las personas está presionada de que, ‘Necesito estos números para el programa,’ y le dice a las personas, ‘¿Por que no vienes a este programa? ... Es un programa excelente para ... para trabajar con sus hijos que están teniendo problemas. Ayudar para prevenir las drogas y el alcohol, fumar cigarrillos.’ ... y las personas, ‘¡Oh, que bueno!’ Pero uno no le pregunta realmente si es algo que puede hacer. Como uno está presionado, uno presiona a las personas hasta nos dicen que, ‘Umm ...no sé si voy a poder.’ Y... y ... las personas inscribiendo a las personas, ‘Ah, pero este, ¿por qué no?’ Tratando de convencerlos porque necesitamos los números. En mi opinion, esa sería la razón número uno de por qué tenemos en las hojas muchos nombres. Yo me acuerdo que estábamos muy presionados de buscar e inscribir a las personas. La persona que estaba encargada estaba muy estresada, ‘¿Y cómo vamos a hacer? Ruégales que vengan,’ ¿no? Yo creo que muchas veces así es con esos programas. Mas cuando es algo de la universidad, de que se tiene que hacer y que hay fechas y eso.” (IDI2)

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TABLE 1

Sociodemographic Description of Study Participants

<i>Variable</i>	<i>Brief Feedback Discussion</i>	<i>Individual Interviews</i>
Female	64 (84.2)	8 (80)
Age, ^a years	37.9 ± 5.6	36.7 ± 11.7
Highest education level		
Middle school or less	18 (23.7)	0
High school	51 (67.1)	4 (40)
Bachelor's degree	4 (5.3)	4 (40)
Master's degree	0	2 (20)
Country of birth		
Mexico	63 (82.9)	4 (40)
Ecuador	5 (6.6)	1 (10)
Other ^b	8 (10.5)	5 (50)
Years in the United States ^{a,c}	15.8 ± 5.7	17.6 ± 10.5
Relationship with youth		
Mother	64 (84.2)	
Father	11 (14.5)	
Guardian	1 (1.3)	
Marital status		
Married or cohabiting	67 (88.2)	
Single, never married, or divorced	9 (11.8)	
No. of children living in the house ^a	2.6 ± 1.1	
Monthly family income, \$		
<1,000	27 (35.5)	
1,000–2,000	35 (46.1)	
>2,000	9 (11.8)	
Intervention group	42 (55.3)	
Average number of sessions ^{a,d}	5.86 ± 2.8	

NOTE: Values are numbers (%), unless otherwise noted.

^a $M \pm SD$.

^b Focus groups included participants born in El Salvador, Guatemala, Nicaragua, Puerto Rico, Cuba, and the United States, and individual interviews included participants born in Peru (2), United States (2), and Colombia (1).

^c Participants born outside the United States only.

^d Participants randomized to the intervention group only.

TABLE 2

Categories, Themes, and Exemplifying Quotations of Factors Positively Affecting Participation in PIJP in Focus Groups and Individual Interviews

<i>Categories and Themes</i>	<i>Exemplifying Quotations</i>
Individual and family factors <ul style="list-style-type: none"> Type of motivation (P and F) Responsibility, discipline and commitment (P) Longer time living in the United States (F) Having previous experiences in other programs (F) Both parents from the same family participating (F) 	<ul style="list-style-type: none"> “I think that the interest more than anything ... If you don't have interest, you lose it, and don't come” (BFD8, q1) “At the beginning I came because of the gift card, but now I don't care because I have good communication with my son, that is better than the card. If we receive a gift card it will be welcome, but if not, that is o.k.” (BFD4, q2) “I have had some [youth], who attend because they want to, and I have seen that parents are not as interested, and the youth are the ones who want their families to come to this [program].... Some parents are coming only because their children want to come. You can see this with the parents that don't participate much, and the youth is participating a lot, that they are the ones who want to come and be more informed, and learn different ways to solve the situations, and their parents not that much” (IDI5, q3)
Program factors <ul style="list-style-type: none"> Building a trusting and supportive relationship between participants (P and F) Topics matching the interest of participants (P and F) Offering food and childcare (P and F) Having reminders (P and F) Having a fun experience (P and F) Delivered in an appropriate site (F) Easy to teach for facilitators (F) Including participants with diverse backgrounds (F) Having facilitators known and trusted by participants, with adequate facilitation skills and good interpersonal communication skills 	<ul style="list-style-type: none"> “What motivates me the most are the conversations with other parents, because that is how you know other parents and their experiences. For example, many times we stay closed in ourselves and don't talk to other people about our problems, don't express what happens, because of embarrassment of what they will say. Having trust, we share with others getting the best out of everyone” (BFD6, q4) “If they don't feel trust, they could come once, but then they will not come again” (IDI4, q5) “Interviewer: Do you think that the content of the program was attractive to families?; Facilitator: Ohh yes! I think that, as we say in our country, it was like a ring for the finger. It was very good. I think it was very balanced” (IDI5, q6)
Research factors <ul style="list-style-type: none"> Having gift cards (P and F) 	<ul style="list-style-type: none"> “To my children it was a very important hook [having gift cards], that's why they didn't want to miss” (BFD1, q7)

NOTE: PIJP = Padres Informados Jovenes Preparados; P = parents; F = facilitators; BFD = brief feedback discussion; IDI= in-depth interview.

TABLE 3

Categories, Themes, and Exemplifying Quotations of Factors Negatively Affecting Participation in PIJP in Focus Groups and Individual Interviews

<i>Categories and Themes</i>	<i>Exemplifying Quotations</i>
Individual and family factors <ul style="list-style-type: none"> Personal and family characteristics (P and F) Having conflicts in the family (P and F) Needs, motivations, and interests change over time (P and F) Different value for the need of better parenting skills or parent-youth relationships (P and F) Multiple commitments (P and F) Work-Unemployment (P and F) Transportation (P) Unexpected events (P and F) 	<ul style="list-style-type: none"> “At the beginning I participated, but in the second class I could not participate, because I am father and mother at the same time, and for me, things are very complicated as a single person. I would like to participate but it is really difficult for me. ... Everyone has its life, their family, with our children it is hard for me because I work on my own, I go to one place, then to another, don't drive, and I'm concerned for my children, and time goes by. So, if I leave everything I can come, but I can't, and to arrive late, better not. So I will try to go forward. So many things to do ... and my time is not enough” (BFD2, q8) “I know that there were youth in that group that had their parents deported. I know that was umm ... alcohol abuse. I know that there was family violence. I know that there was drug abuse. I know that there was ummm ... relationships where the kid did not talk Spanish and the mom did not talk English, and communication was very difficult. I know that there were very catholic families, very strict, and the girl that was not even sure if she believed in God, and that friction. ... There was everything in there! ... And when one is going through all those situations anything could blow up, and they could say 'No, now we are not doing anything! We are not going there!' and then everyone goes to their side” (IDI2, q9)
Sociocultural factors Community factors <ul style="list-style-type: none"> Lack of educational resources (F) Relational conflicts (F) Living multiple stressful situations (F) 	<ul style="list-style-type: none"> “There's a lot of conflict between some people within the community. Lots of community rumors and somebody's rattled out somebody else's neighbor or someone cheated on someone's husband or something like that. So I feel like that could be a big thing that we might not even hear about because it's embarrassing maybe for them to tell us that they can't come because the other woman who's coming is the ex-wife of the husband who cheated on the aunt or something like that” (IDI10)
Cultural beliefs <ul style="list-style-type: none"> Not taking commitments seriously (P and F) Having traditional gender roles (P & and F) Having low interest in educational activities (F) Not being used to participating in parenting lessons (F) Challenges with long-term planning (F) Not wanting the provider, recruiter, researcher, or others to know that they have questions or did not understand explanations (F) Feeling embarrassed if someone knows that they have questions or did not understand explanations (F) Not feeling able to say “no” to a provider that is perceived as having greater authority (e.g., physician; F) Feeling embarrassed or uncomfortable, or believing that it is disrespectful to say no to invitations (F) 	<ul style="list-style-type: none"> “I think that the problem is that Latinos, I don't know how to say it, we are spoiled. We commit to something and half hour later we don't go” (BFD6, q10) “I think that there are husbands that don't like coming. For example, my spouse tells me: 'What are you going to do there? You are wasting your time'” (BFD10, q11) “Facilitator: Because we are so vulnerable, we are so changing, very weak in the commitments we make; Interviewer: When you mention 'we,' do you mean Latinos? Facilitator: Yes, and I include myself. I include myself because it is something that I have been learning from this culture, where if we say that we will go, we make even what is impossible to go. But as Latinos we think, 'Oh no, even I said yes, I better call and say no,' or not even calling and not showing up. That is very common” (IDI1, q12) “Many fathers tell women: 'You go, because you are the mother, you are the one in charge of raising the kids. I am the provider. I only bring money so nothing is missing at home.' ... Because of predisposition, the man will say 'no, my family is fine, we don't need that, I don't need that a third person tell me what I have to do with my family'” (IDI9, q13) “Interviewer: Is it frequent that fathers don't come because they are at home watching TV or doing something else in their free time?; Facilitator: I think it is frequent because there are topics where they [youth] say: 'oh, my dad is just at home,' and we still think based on what the spouse says 'no, my husband is working,' but they uncover that he is not working, but at home and doesn't want to come” (IDI5, q14)

<i>Categories and Themes</i>	<i>Exemplifying Quotations</i>
<ul style="list-style-type: none"> • Preferring therapeutic care rather than preventive care (F) • Thinking that it is better not to attend than to arrive late (F) 	
Program factors	
<ul style="list-style-type: none"> • Schedules (P and F) • Number and length of the sessions (P and F) • Content (P and F) • How the program is organized and presented to participants (P and F) • Having facilitators with inadequate facilitation skills • Having facilitators who were obligated to deliver the program • Having facilitators with dissimilar gender, age, or ethnicity of participants 	<ul style="list-style-type: none"> • “At the beginning I said, ‘Wow! Maybe they are not going to respond because these are eight sessions,’ and I saw it as long, but at the same time when time goes on, weeks, and they are committed, they concluded, ‘Ohh, this didn’t feel like eight sessions!’; but if you are not committed ... you feel them: ‘Ohh, eight sessions and I still have four to go!’” (IDI1, q15) • “Sometimes one has already gone to programs and hears the same, or there things that have been taught and you already know them. So one thinks that is the same, and stops going” (BFD12, q16) • “I think what it was said was fine, but time to talk between us was missing, to share our experiences” (BFD8, q17)
Research factors	
<ul style="list-style-type: none"> • Ways participants were recruited (F) • Busy researchers and recruiters (F) • Randomized into a different group than friends or other family member (F) • Training or materials not delivered on time (F) 	<ul style="list-style-type: none"> • “The person that wants to register people is under the pressure of ‘I need these numbers in the program,’ so she says to people, ‘Why don’t you come to this program? It is an excellent program to work with your children that are having trouble. To help to prevent drugs, alcohol, and smoking,’ and people, ‘Oh, great!’ But one never asks if that is something that they could do. As one is pressed, one pushes people until a point that they say, ‘Umm. ... I’m not sure if I’m going to be able,’ and the person recruiting ‘Uhh, but why not?’, trying to convince them because we need the numbers. In my opinion this would be the number one reason of why we have many names on the lists. I remember being very pressed to search and register people. The person responsible of recruitment was very stressed, ‘How are we going to do this? Beg them to come.’ I think that sometimes this happens with these programs, especially when is something of the university that needs to be done, and there are dates and so” (IDI2, q18)

NOTE: PIJP = Padres Informados Jovenes Preparados; P = parents; F = facilitators; BFD = brief feedback discussion; IDI = in-depth interview.

TABLE 4**Recommendations to Increase Participation in Future Studies Given by Padres Informados Jovenes Preparados****Individual and family factors**

- At enrollment, ask participants about their willingness to complete the program, their availability, other commitments, transportation, and food preferences (P and F)
- Narrow the age range of the target youth (F)
- During the first session, talk about transportation during the program and incentivize that participants give rides to each other (P)
- Provide transportation if needed (P and F)

Sociocultural factors

- Improve participant selection (F)
- Reach out to men's groups in the community (F)
- At enrollment, include a conversation about the benefits of better parenting skills and better parent-youth communication, particularly with fathers (P and F)
- At enrollment, include a conversation about how cultural beliefs might affect participation (P)
- At enrollment, include a conversation about how important fathers are for the child's education (F)
- Include activities for the parents divided by gender (F)
- Include a discussion about how the program's content can be shared with nonparticipating partners, especially fathers, and have handouts for them (F)
- Delay decision to enroll for a day after the first explanatory session (F)
- Ask parents to make a written commitment to attend all sessions, arrive on time, and obey the group rules (P)

Program factors

- Tell participants ahead of time (at least 2 weeks) when the program will be delivered, and avoid rescheduling (P)
- Include more activities and opportunities to share between participants (P)
- Split the program in modules that parents could attend according to their needs (P)
- Include contents on emotional regulation (P)
- Include activities for the children in the childcare (P and F)
- Include a way to make up sessions that participants could not attend (P and F)
- Schedule the program according to the participants' availability (P and F)
- Include more activities and opportunities to share between participants (P and F)
- Invite people who completed the program to give testimonials or other guest speakers (P and F)
- Include more parent-child activities (F)
- Include an activity promoting a strong emotional connection between parents and children during the first session of the program (F)
- At the end of the session, ask parents to share what they learned (F)
- Have the manual and participant handouts written in "common" language (F)
- Have a similar number of sessions for parents and youth (F)
- Include more content on discipline and include conversations on sexuality and legal issues (F)
- Improve the quality of the youth curriculum (F)
- Have more food (F)
- Train facilitators in facilitation techniques, in addition to the curriculum (F)
- Include more male facilitators (F)

Research factors

- Hold a raffle each day for those arriving on time (P)
- Give a gift card or another incentive for program attendance (P and F)
- At enrollment, include a clear description of what the program is about and the importance of active and complete participation (P and F)
- Introduce parent and youth facilitators at enrollment (F)
- Get youth contact information so they can be reached directly by their facilitator (F)
- Have friends or relatives randomized in the same treatment group (F)
- Deliver the program supplies on time at the different sites (F)

NOTE: P = parents; F = facilitators.