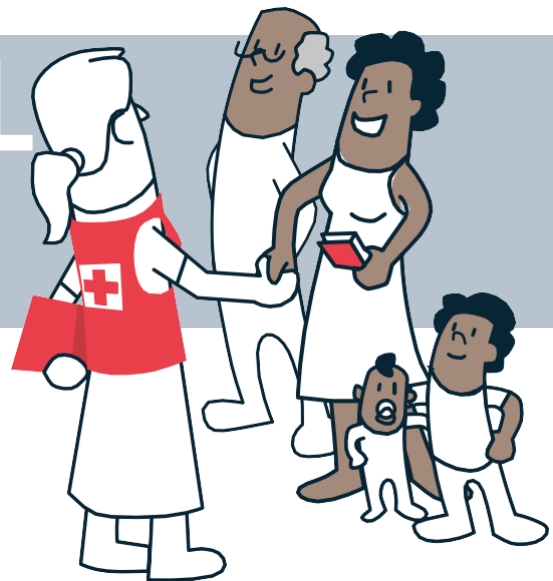


ECP-12

Interview for the assessment of Parental Competencies

Entrevista para la evaluación de
Competencias Parentales

TECHNICAL
MANUAL



TECHNICAL MANUAL

ECP-12

Interview
for the
assessment of
Parental
Competencies

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1

PRESENTATION

The upbringing and education of children is one of the main challenges for families today, and there are many adults who experience, to a greater or lesser degree, difficulties, insecurities, doubts and frustrations, requiring support to achieve an adequate and positive exercise of their functions and responsibilities as mothers and fathers. In order to respond to this need, it is necessary to have both quality family support policies and services, as well as a body of scientifically endorsed knowledge about what a positive exercise of parenting means, what competencies and abilities are necessary for its performance, and how to assess to what extent adults have these competencies.

There are many entities and organisations that currently have projects and programmes whose purpose is to promote the parental competencies necessary for a positive exercise of parenting. To ensure the effectiveness of these interventions, it is essential to have validated assessment tools which allow for a rigorous assessment of parental competencies.

Within this framework, the interest of the Spanish Red Cross arose in incorporating a tool for the assessment of parental competencies, into its support projects for families with dependent children, which would be useful for professionals, both in the assessment phase and when dealing with the family intervention process, and which had sufficient rigor from a psychometric standpoint.

This interest gave rise to the establishment of a Collaboration Agreement between the Spanish Red Cross and the University of Seville whose purpose was the development of a tool for the assessment of parental competencies which could be incorporated and used by the teams involved in the support projects, for families with children, carried out by this organisation.

As a result of this collaboration, in this document the **Interview for the assessment of Parental Competencies (Entrevista para la evaluación de Competencias Parentales, ECP-12)** is introduced. The ECP-12 allows the assessment of the parental competencies of the adults responsible for the upbringing and education of children and adolescents, and is especially designed to be a useful resource for professionals involved in family support and intervention services. The ECP-12 is the result of a complex construction and validation process, aimed at guaranteeing that the designed assessment tool meets the internationally agreed validity and reliability standards. The production of the ECP-12 has taken more than two years, and was based on a study of the situation in which the families and professionals, involved in the Family Intervention project, were given a voice in order to know the strengths and needs regarding the assessment. A systematic review of the empirical literature was carried out, which made it possible to identify, with scientific evidence, the competencies and dimensions involved in the positive exercise of parenting. Subsequently, after the preparation of the preliminary version, and with the objective of analysing the operation of the tool, a pilot study was carried out, that involved both a qualitative and quantitative approach to obtain evidence of reliability and validity of the developed tool.

As a result of this laborious construction process, the final version of the ECP-12 allows the assessment of twelve fundamental competencies for a positive exercise of parenting. The application format is a semi-structured interview which allows the different competencies that are subject to assessment to be addressed through a script organised by theme. For each of the twelve assessed competencies, the tool presents a set of observable indicators which facilitate assessment by the professional. Furthermore, in this revised and updated edition, information is included for the proper interpretation of the scores in each of the competencies.

It is a tool that can be incorporated into the family assessment phase, as it is a respectful and understandable proposal for the families themselves. Similarly, it can be used in the accompaniment and/or follow-up phases, resulting in a useful and easy-to-apply resource for professionals.

The use of the ECP-12 can be useful for different purposes. On the one hand, as a validated assessment tool, it makes it possible to rigorously ascertain to what extent a person has the parental competencies necessary for an adequate exercise of parenting. This information is essential, both for decision-making in situations of risk or lack of protection, and for the development of the intervention plan in the field of family preservation actions. On the other hand, the ECP-12 can also be used to assess the effectiveness of the interventions that are carried out. For that purpose, its use before and after the intervention process makes it possible to verify the change experienced in each of the competencies assessed.

In this manual, and after this presentation, the following section describes the process of developing the ECP-12; the theoretical model of parental competencies that is the object of assessment is presented in the third section; the fourth section details the characteristics of the tool; the fifth section gives the guidelines for its application and scoring; and finally, the references and the appendices are provided. There are many people who have participated in the different phases of the preparation of this tool, all of them (families, professionals and academics) must be thanked for their valuable contribution to enable the presentation, in this document, a validated tool which allows a rigorous assessment of the parental competencies involved in a positive and responsible exercise of parenting.

In this manual, for economy of language, we will use the term children for those boys, girls, and adolescents who are cared for by biological families, foster families, grandparents, educators, or adoptive families. In the same way we will call fathers and mothers the people who take care of parental tasks.

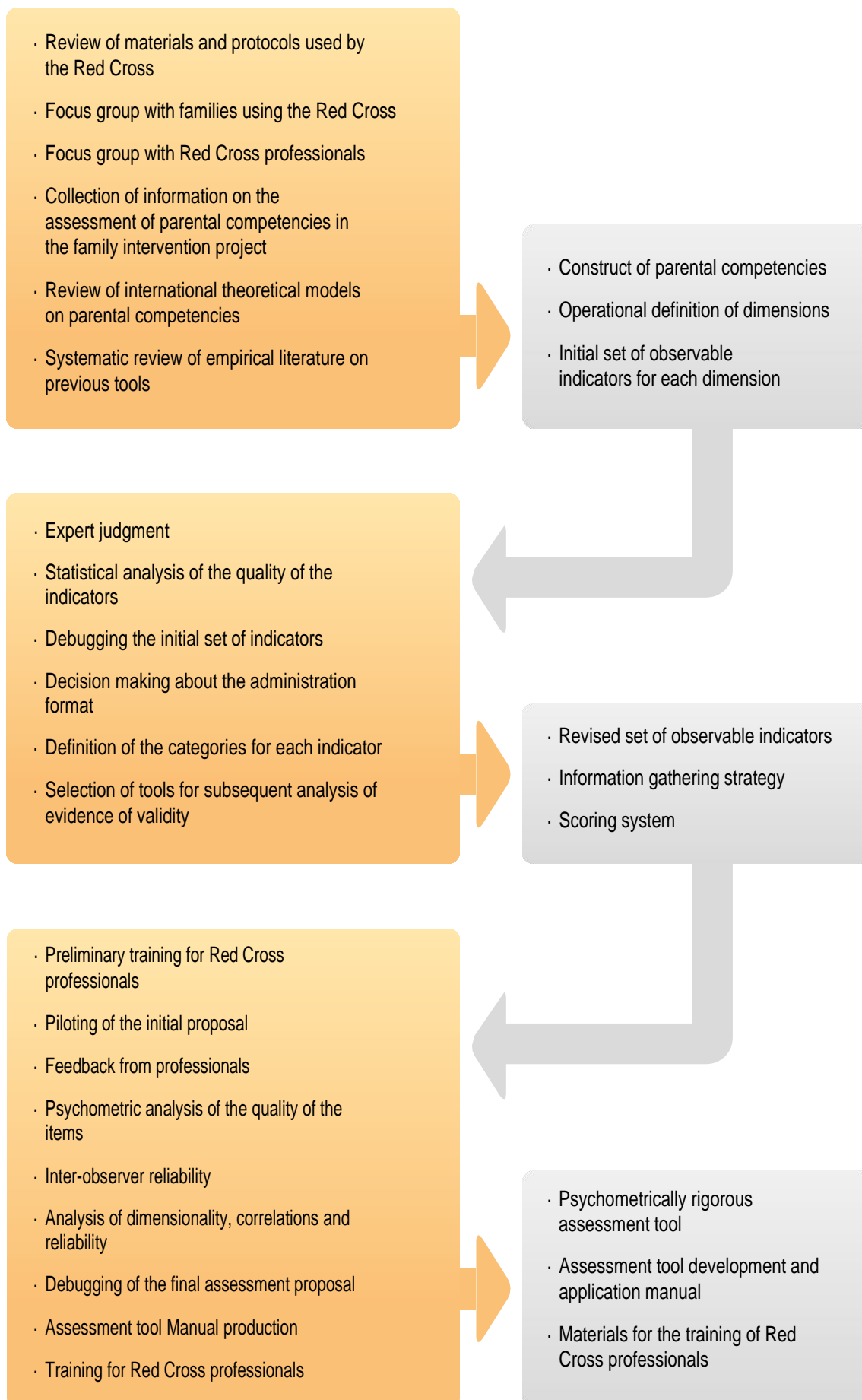


2

THE ECP-12 DEVELOPMENT PROCESS

The process of development of the Interview for the assessment of Parental Competencies (ECP-12) has required different actions by the research team, to offer a psychometrically rigorous assessment tool, in accordance with the most agreed standards in terms of the construction of scales at the international level (American Educational Research Association, 2014; DeVellis, 2017).

The figure below shows a **summary of the development of the tool, from a chronological point of view**, indicating both the tasks developed for the construction of the tool in each phase of the process, as well as the milestones reached in each of these phases.



The development of the actions, in the first phase of the tool development process, has made it possible to achieve the following milestones: a theoretically and empirically-based construct of parental competencies, which also guarantees ecological validity; an operational definition of the dimensions that make up said construct; and, an initial set of observable indicators for each of these dimensions. The development of the actions, in the second phase of the tool development process, has made possible a revised set of indicators on the constitutive dimensions of the construct of parental competencies; a strategy for collecting useful information for the administration of the tool; and, an assessment tool scoring system. Finally, during the third phase of the tool development process, the following milestones have been achieved: a psychometrically refined final assessment tool; a manual for the development and application of the assessment tool; and, materials for the training of Red Cross professionals.

Before presenting the final product that makes up the Interview for the assessment of Parental Competencies (ECP-12), **the actions of the tool production process, which have required an empirical approach**, are described below, rigorously, but also concisely. Specifically, the methodology developed in relation to the study of the situation is described (integrating both the study of existing documentation and protocols, as well as the forming of focus groups, and the application of a questionnaire for the professionals of the family intervention project). There is also a systematic review of the empirical literature and a description of the pilot study which was carried out (integration of the tasks of expert judgment, pre-piloting and piloting, combining various quantitative and qualitative analyses).

2.1. Study of the state of the art

The tool production process began with an analysis of the family assessment strategies and dimensions, used by the professionals of the Red Cross Family Intervention Programme. This study of the situation had the objective of exploring both the strengths and the needs, in terms of assessment, using qualitative and quantitative techniques, and having the different agents involved in family intervention actions as sources. For this, after a preliminary phase of study and review of all the documentation and family assessment protocols, used in the organisation, two focus groups were formed (one with families and the other with professionals), and later, a questionnaire, prepared ad hoc, was applied to collect information from the professionals involved in the family intervention project.

The **focus group, with mothers and fathers** participating in the Red Cross Family Intervention Programme, allowed families to have a voice with a double objective: on the one hand, to identify parental competencies in which adults perceived

changes, as result of the intervention, and, on the other hand, to recognise the competencies for which they felt they needed more support. Eight mothers and 1 father participated the focus group, 6 of the mothers and the father were of immigrant origin, and the other 2 mothers were Spanish. In all cases, they were adults with a low socio-economic level, who were caring for school-age children. Following the recommendations for the use of this qualitative strategy for collecting information, a semi-structured script of clear and open questions was used, in accordance with the objectives set (Escobar and Bonilla-Jiménez, 2009; Onwuegbuzie et al., 2011). The group was moderated by two researchers and, with the consent of the participants, the session was fully recorded for subsequent transcription of the interventions. The analysis of the participants' discourse made it possible to identify both the parental competencies in which the adults perceived that they had improved, as a result of the intervention, and those for which they needed more support.

During the discourse, specific competencies emerged related to: the use of control ("they teach you how to set rules for your children", "discipline is fundamental"); communication ("we have learned how to talk to the children"); the stimulation of autonomy ("I would like to learn how not to be so overprotective, and have my daughter do things alone"); the need to adapt educational practices to developmental changes ("adolescence is the most difficult"); the management and resolution of family conflicts ("I can't when he fights with his brother"); the support of a partner ("what do I do if I can't count on the father"); and, everything related to school support ("I can't help because I don't understand it").

The **focus group with Red Cross professionals** had the following objectives: to explore the conditions and assessment strategies, used in the family intervention projects, in the different offices of the organisation; to recognise the parental competencies that the different teams assessed; and, to discuss their strengths and weaknesses in terms of family assessment. The participants in this focus group were 14 professionals (12 women and 2 men) pertaining to 12 local assemblies from different communities in Spain, with the vast majority being responsible for the family intervention projects of the different local assemblies. In relation to their training, they were mostly social workers, psychologists and social educators. The group was moderated by two researchers using a semi-structured script, with open and clear questions, that was prepared in accordance with the stated objectives (Onwuegbuzie et al., 2011). With the consent of the participants, the session was fully recorded for subsequent transcription of all interventions. Firstly, the analysis of the interventions revealed a certain variability in the assessment strategies used by the different teams, but with two clear coincidences: the mother was practically always the one interviewed in the assessment (usually the main carer); and, in all cases, the tool used for the assessment was a more or less structured interview.

Secondly, the analysis of the participants' discourse provided highly relevant information to find out to what extent parental competencies were assessed by professionals. This analysis revealed that the main dimensions assessed were: expectations of the fathers and mothers; distribution of roles within the family; educational practices and relationships with the children; adaptation of children and adolescents to school; leisure activities; family functioning; and, family and social support networks. Finally, an important agreement was observed in highlighting the alliance and good relationship established with the families, as a strength in their assessment processes, and the lack of systematicity, and the need for specific training, as main weaknesses.

The information obtained in the focus groups was used to design a **questionnaire** which would allow information on how the evaluation process was carried out, within the family intervention projects in the different local assemblies of the Red Cross, to be obtained systematically. Above all, this served to explore the value and importance that professionals attached to the different dimensions of parental competencies in the family assessment process.

To achieve this, a questionnaire was prepared which included questions related to the characteristics of the assessment process (when it is carried out, time spent on it, interviewees, tools used, etc.), and a list of 19 dimensions of parental competencies to assess (on a scale from 1 = Not at all, to 3 = A lot) to what extent each dimension was considered important and each dimension was assessed. This questionnaire was sent to all the local assemblies in which the family intervention project was implemented, so that it could be completed by all the professionals involved in said project. Responses were obtained from 107 professionals (92 women and 15 men), with different qualifications in the psycho-socio-educational field (social workers, psychologists, social educators, pedagogues, social integrators, etc.), who had an average seniority in the Red Cross of 8.50 years (ranging from a maximum of 32 years to a minimum of 3 months) and an average experience in the family intervention project of 4.20 years (ranging

from a maximum of 32 years to a minimum of 1 month). The analysis of the data collected confirmed, firstly, the information obtained on the characteristics of the assessment process within the focus group: in 60.00% of the cases, only the main carer (mainly mothers) was the interviewee, and in more than 98.00% of the cases the central tool of the assessment was an interview.

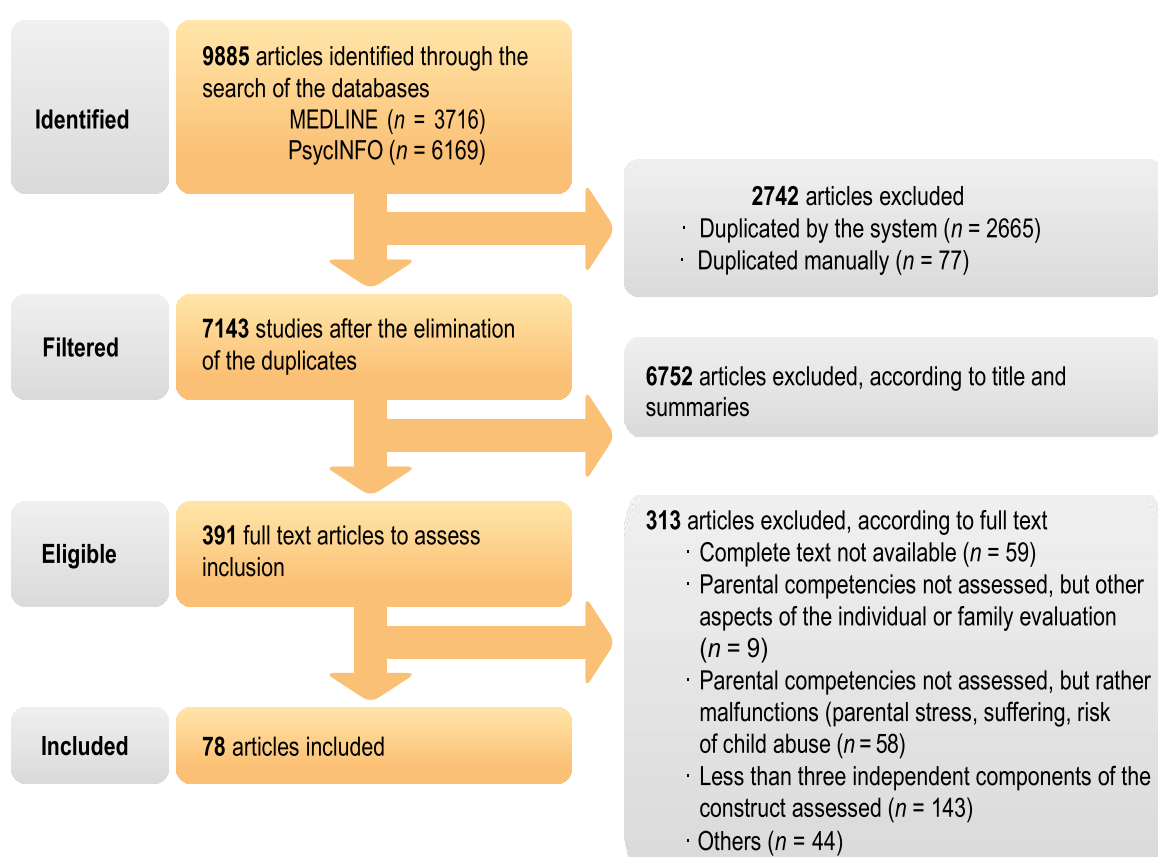
Secondly, and in relation to the importance of the different dimensions of parental competencies for the assessment, those valued as most important were: knowledge about childhood needs; emotional bonding; organisation of daily life; communication; positive expectations towards the children;

self-regulation; coping with stress; and, control and supervision of children and adolescents. Despite the fact that all these dimensions were considered very important to assess by more than 90.00% of the professionals, it should be noted that the percentage that actually assessed some of them, was much lower. Finally, it should be noted that, when asked to what extent having a standardised tool to assess competencies would facilitate the intervention process, an average score of 7.30 was obtained on a scale of 1 to 10, which revealed a positive expectation of the professionals towards the construction of the tool.

2.2. Systematic review of the empirical literature

Complementary to the study of the state of the art, the construction of the Interview for the assessment of Parental Competencies (ECP-12) required the performance of a systematic review of literature in specialised databases, which would allow the following relevant objectives to be achieved, for the said process of construction: to ascertain what were the parental competencies investigated empirically at an international level; and, to ascertain what tools existed for the assessment of this construct.

The systematic review process was developed, in accordance with the general recommendations of the PRISMA statement (Boland et al., 2014; Higgins and Green, 2011; Moher et al., 2009). The figure below shows the flowchart, in accordance with the PRISMA declaration standards, giving an account of the systematic review process carried out to meet the proposed objectives.



Two researchers, with training in the field of study, carried out the process of searching, selecting and reviewing articles, supervised by a researcher with experience in systematic reviews. The most relevant aspects of the procedure and decision-making, related to the systematic review, are described below, including: the sources and search strategies used; the eligibility criteria applied for the selection of articles; and, the process of selection followed in this review. Subsequently, the main results of this review process are described.

With regard to the **sources** used, a search for peer-reviewed studies was carried out using the Medline and PsycInfo databases. The **search strategy** used was a combination of terms found in the thesauruses of these databases, under the term “parental competencies”, as well as truncated terms (parent* competence*, parent* capacit*, parent* competen*, competen* parent*, parent* abilit*, effectiv* parent*, parent* effectiveness, parent* capabilit*, parent* qualit*, positive parent*, optimal parent*). There were no restrictions regarding the date of publication of the papers, which covered the entire period available in the databases, up to the time of the search (May 2018). Articles in English, Spanish or Dutch, published in periodical journals, were reviewed.

Regarding the **eligibility criteria** for the identification of the articles, both inclusion criteria (for the choice of articles to be reviewed) and exclusion criteria (circumstances which could occur under the conditions of the inclusion criteria, but were rejected by the authors) were used. Regarding the inclusion criteria, the following were considered: studies whose target population were adults with underage children; studies using or validating assessment tools measuring the general construct of parental competencies, from a parental ecology framework, or which assess a minimum of three construct-specific indicators; assessment tools of any kind (questionnaires, observation records, interviews, etc.), whose interviewees were professionals or parents; evidence-based studies that, regardless of their design or methodology, had the objective of validating assessment tools, or evaluating interventions that promote positive parenting. Regarding the exclusion criteria, the

following were excluded: those studies whose interviewees were the children; research that used assessment tools focused on specific parental competencies, in particular situations, on other personal or family aspects not identified as parental competencies or on parenting dimensions from a negative perspective; empirical studies published in the form of monographs, books or doctoral theses.

With regard to the **selection process**, the citations found during the search were exported to the Mendeley reference management software (3761 from MEDLINE and 6169 from PsycInfo), and all duplicates found were eliminated, resulting in a total of 7143 articles. Subsequently, the titles and abstracts of the identified articles were read, and the previously described eligibility criteria were applied. Once articles were excluded on the basis of title and abstract, 391 full-text articles were examined to verify the degree of compliance with the eligibility criteria and to definitively select the studies that would be analysed and included in the review (a total of 78 articles). The two researchers compared and discussed the choice of articles. In those cases in which there was no agreement, the third researcher, responsible for supervision, resolved the disagreement. Inter-observer reliability throughout the review process was appropriate.

The review process resulted in the **extraction** of 78 articles, which were examined in accordance with the dual objectives of this review. Thus, firstly, 151 assessment tools were identified, of which a record of their main characteristics was made, for their subsequent analysis: name; authorship; possible combination with other tools; sample; subscales; psychometric information; effects measured with the tool; and, observable indicators. Secondly, all the parental competencies identified in these assessment tools were listed, as well as the observable indicators used for their assessment.

Regarding the assessment tools identified in the reviewed literature, the Home Observation for the Measurement of the Environment (HOME; Bradley, 1993) inventory, followed by the Adult Adolescent Parenting Inventory (IPAA; Bavolek, 1984), were the most used in the articles reviewed.

A very small number of assessment tools carried out a comprehensive assessment of parental competencies (Bradley, 1993; Kirk et al., 1996; Martín et al., 2013; Martínez-González, 2009), with most studies using a compilation of various tools and/or subscales for the global assessment of parental competencies. Regarding the interviewee, the parents were mostly those who reported their own competencies, although tools based on expert judgment were also found. Regarding the administration format, the tools referring to parental competencies of an eminently personal nature (such as the adjusted perception of the parental role, expectations about child development or coping strategies), used Likert-type scales designed to be self-administered. The tools referring to dyadic parental competencies (such as parental educational practices or affective bonding) presented a more diverse format, including both self-administered questionnaires and observational records of practical situations (real or simulated).

In relation to the identified parental competencies, the most frequently cited in the reviewed literature were the following: parental educational practices; knowledge and expectations about child development; perception of parental self-efficacy; parental self-esteem; and, family organisation.

These competencies had been assessed in diverse samples, both from the community context and from situations of risk and/or social exclusion. In addition, the samples also varied in terms of the age of the children, finding studies focused on families with young children, as well as families with adolescent children. These dealt with parental competencies that had mainly been used in effectiveness assessments in programmes aimed at promoting positive parenting, with very few studies referring to validation of scales.

In short, the systematic review of the literature made it possible to identify key competencies in family interventions aimed at promoting positive parenting, as well as to recognise the observable indicators used to assess such competencies. In addition, this review revealed a wide availability of self-administered tools, referring to specific competencies, but a reduced number of comprehensive tools for the assessment of such competencies through expert judgment. Among the latter, we did not find administration systems that would facilitate the collection of information on the indicators to be assessed (such as interviews, guiding questions, etc.).

2.3. Pilot Study

The objective of a pilot study is to analyse the operation of the tool being developed within a sample of participants with characteristics similar to the population of interest. It is a fundamental stage, as it allows possible errors to be corrected, and a first verification of the functioning of the tool within the context in which it will be applied (Muñiz and Fonseca-Pedrero, 2019). For the development of the Interview for the assessment of Parental Competencies (ECP-12), a pilot study was carried out, incorporating both qualitative and quantitative elements, in an interrelated manner (Wilson, 2005). From a qualitative perspective, expert consultations were carried out to examine different aspects

related to the measurement tool (for example, the detection of semantic or grammatical errors, the degree of comprehensibility of the items, possible semantic inconsistencies, etc.), as well as the analysis of the open answers, given by the participants. From a quantitative perspective, the metric properties of the preliminary version of the tool were examined, for which various statistical analyses were carried out which allowed evidence of construct and criterion validity to be obtained (Elosua, 2003). The different qualitative and quantitative processes carried out to refine the tool are explained below, sequentially.

As a result of the previous phases, a set of 120 indicators, theoretically grouped into 11 dimensions, designed to be evaluated through professional assessment, was prepared. Following the recommendations of various authors, such as DeVellis (2017), the provisional tool was designed three times longer than what had been intended as the final tool as, in this pilot phase, the items are refined and those which present better psychometric functioning are selected.

The first step consisted of submitting this set of indicators and the defining dimensions of parental competencies to **expert judgment**, through which to obtain evidence of validity, based on the content of the test (Pedrosa et al., 2013; Sireci and Faulkner -Bond, 2014), that is, by analysing whether the tool measures the content area expected to be measured (Frank-Stromborg & Olsen, 2004). The sample consisted of 25 experts, both Red Cross professionals with experience in family intervention (68.00% of the sample), and reputable researchers in positive parenting at the national level (32.00%). They were professionals with training in the field of social sciences (Degree or Doctorate in Psychology, Social Work, Social Education, Pedagogy or Sociology), the vast majority of whom were women (80.00%), between 25 and 67 years of age ($M = 44.36$), with an average professional experience of 17.44 years, particularly, 13.24 years in the field of study or family intervention.

Through a questionnaire of open questions, the experts had the option of making any suggestion for improvement that they thought appropriate, related to the detection of semantic or grammatical errors, the degree of comprehensibility of the items, possible semantic inconsistencies, the adequacy of the constitutive dimensions of the construct, etc. In addition, the experts analysed the representativeness of each item, with respect to the dimension to which it had been assigned, as well as its usefulness to assess parental competence, with respect to the domain where it was assigned, and the clarity in the formulation of the indicators. (DeVellis, 2017).

The degree of consensus among the experts was quantified using various indices, such as the Osterlind (1998) congruence index and the Content Validity Ratio (Ayre and Scally, 2014; Lawshe, 1975). Most of the items showed satisfactory results, in terms of representativeness, usefulness, and clarity, so they were maintained for the refined version of the tool. Based on the results obtained, 24 indicators that did not show satisfactory quantitative results were deleted, and 39 indicators were refined, based on the comments by the experts. At this point, 11 defining dimensions of parental competencies, and 88 indicators, remained to continue the process. At this point in the process of producing the tool, it was decided to allocate each indicator five levels of response category, and the interview format was chosen as the administration system. Guidelines for the response categories were described, and an interview script was designed to facilitate the completion of the indicators.

The initial proposal of the assessment tool was submitted to a **pre-pilot process**, in which two experts and researchers from the project participated. The objective of this step was to verify the degree of consensus they showed, regarding the coding of the categories of each indicator, and the adequacy of the interview script. During this step, it was decided to eliminate 7 indicators which did not show a satisfactory degree of agreement among the experts, and the categories of 16 indicators were redefined, leaving 81 indicators for the next phase, and maintaining the 11 defining dimensions of parental competencies. The interview script was revised and adjusted.

With the refined proposal of the assessment tool, a **pilot test** was carried out among the professionals of the different Red Cross offices. Each local branch was asked to carry out between 4 and 6 pilot interviews, incorporating families with different **sociodemographic characteristics**, to explore how the tool worked, based on the sociodemographic profile of the families.

Information was obtained from 586 families, from which significant differences in the responses given to the indicators were analysed, based on variables such as, being an immigrant, being a single-parent family, educational level, job qualification, relationship with the boy, girl or adolescent, sex of the coder, type of the coder and sex of the boy, girl or adolescent. Significant differences were observed in the responses depending on the type of coder (Red Cross worker, volunteer or trainee). For this reason, in order to obtain the most consistent results possible, it was decided to refine the tool exclusively from the responses of the Red Cross professional workers participating in the pilot study, referring to a total of 496 families. Fathers and mothers comprised 83.60% of the interviewees with a mean age of 41.56 years ($SD = 10.62$), women in 92.34% of the cases, and immigrants in 52.82% of the cases, with a low to average level of education (87.50%) and mostly in an unemployed situation (73.39%). These interviewees mostly headed single-parent households (54.84%) with an average of 2.18 children or adolescents in the home. Regarding the professionals, 91.50% were women with an average age of 35.71 years ($SD = 7.73$), an average professional experience of 9.70 years ($SD = 7.18$), specifically working in the Red Cross for 7.35 years ($SD = 6.56$), and in family intervention projects for 4.06 years ($SD = 5.30$), and being responsible for the family intervention project in 51.50% of the cases.

In each local assembly, it was requested that at least one of the interviews be coded by two professionals, independently, to examine the inter-observer reliability, in order to verify to what extent different coders responded similarly to the indicators of the same family. There were 100 codings in this process, obtaining satisfactory Intraclass Correlation Coefficients for all indicators (> 0.75) (Rosner, 2006).

One hundred and twenty **qualitative comments** provided by the professionals who completed the tool were recorded, of which 5 referred to the characteristics of the assessment tool and were coded to incorporate improvements in the tool.

These improvement proposals made reference to the presence of grandmothers as parental figures and the need to use inclusive language which recognised this reality.

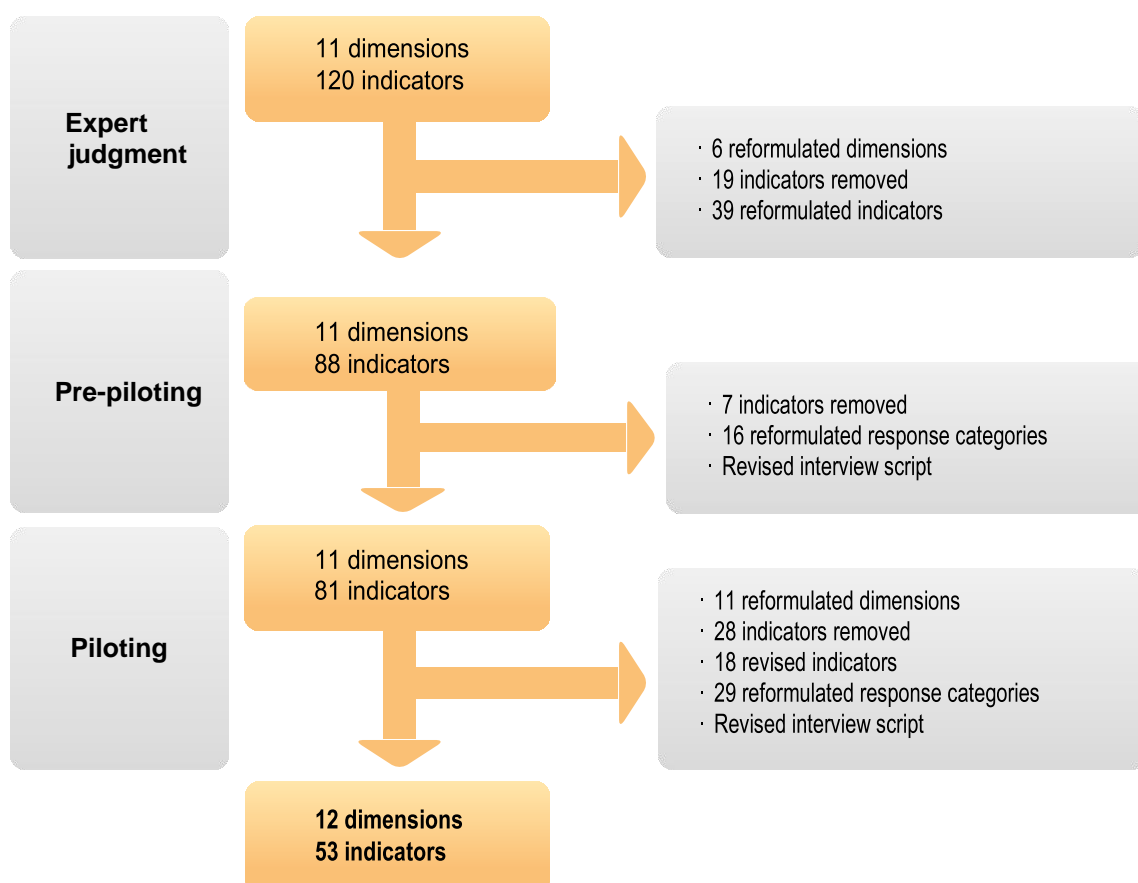
Once the coherence in the responses of the coders was verified, and the qualitative comments provided by the professionals were examined, the information from the total of 496 families interviewed by the professionals, hired by the Red Cross, was used to carry out the subsequent analyses. First, the **psychometric quality** of the indicators (items) was analysed through the indices of asymmetry, kurtosis and discrimination (Muñiz, 2018). This allowed a first vision of those indicators which best fitted the proposed design, and those others that were likely to be deleted or modified. Subsequently, the **dimensional structure** underlying the scores of the measurement tool was examined, using rigorous statistical procedures, such as the Exploratory and Confirmatory Factor Analyses (Ferrando and Anguiano, 2010). Indicators that presented a low factorial load, or that did not fit the proposed theoretical model, were eliminated. Twenty-eight indicators were eliminated, due to problems of asymmetry, kurtosis or discrimination. In addition, it was observed that the self-administered indicators were grouped, not by the content, but by the format of the indicator, so that 7 indicators, with good psychometric performance and with a self-administered format, were maintained. The idea was to review them in the future, changing them to hetero-administered, as per the other indicators. The remaining 53 indicators showed, as a whole, a very satisfactory reliability or internal consistency ($\alpha = .97$). The interview script was adjusted, so that each block of questions referred to each of the dimensions obtained, with a total of 12 main questions to evaluate the 12 finally established dimensions.

Similarly, through **correlation analysis**, the relationship between the scores in the tool and in others that measure related constructs, such as the Parenting Competence Scale for Parents with Young Children (Martínez-González and Iglesias-García, 2018), and the Positive Parenting Scale

(Suárez, Byrne & Rodrigo, 2016) proving that, there were statistically significant correlations ($r = .71$ and $.46$, respectively; $p < .001$). The correlation with the KIDSCREEN Questionnaire (European Kidscreen Group, 2006) which assesses the health-related quality of life for children and adolescents, also showed satisfactory results, both in its version completed by the Red Cross professional workers ($r = .39$, $p < .001$), and in the one completed by the parents ($r = .56$, $p < .001$).

In summary, the proposal presented in the following sections to assess parental competencies, is the result of a rigorous development and refinement process. Based on an exhaustive study of the situation, and a review of the available literature, an initial proposal was made which has been piloted

and refined through various quantitative and qualitative analyses. The results obtained allowed us to review the proposed interview script, reformulate some dimensions, eliminate certain indicators, and reformulate many others, as well as reformulate some response categories to obtain a refined version. The final 12 dimensions and 53 indicators that make up the final version are explained below, as well as their response categories and the interview script for their administration. In the figure below, a flowchart is presented which includes each of the steps developed in the pilot study, emphasising the refined aspects, until the final version of the Interview for the assessment of Parental Competencies was obtained (ECP-12), this is described in a later section.





3

THEORETICAL MODEL OF PARENTAL COMPETENCIES

In this tool, **parental competencies** are defined as *the feelings, attitudes, knowledge, skills and strategies required for an adequate performance of parental duties and responsibilities. A responsible parenting exercise requires commitment to, and involvement in, childrearing tasks in order to guarantee the rights of children and adolescents, and to satisfy their developmental and educational needs, in an adaptive manner and according to the socio-cultural context.*

The definition of parental competencies, referred to in this Interview for the assessment of Parental Competencies (ECP-12), rests on the notion of

parenting proposed by the Council of Europe, in its recommendation to Member States on policy to support positive parenting, which defines it as "all the roles falling to parents in order to care for and bring up children" (Council of Europe, 2006, p. 2). The working group appointed by the Committee of Experts on Childhood, and the Family of the Council of Europe, extends this definition, understanding that parenting designates the set of relationships and activities in which parents are involved in caring for, and educating, their children. Parenting implies, therefore, putting into operation a set of cognitive,

emotional and material resources that allow adults to play their role as parents, that is, responding to the needs of their children at the physical, affective, intellectual and social level (Daly, 2007). Based on this definition, a positive exercise of parenting implies the behaviour of parents, based on the best interests of children and adolescents, which cares, develops their capacities, is non-violent, and offers recognition and guidance which include the establishment of limits allowing their full development (Council of Europe, 2006).

From these approaches, the task of being a parent involves establishing positive relationships with children. Relationships that must be based on the exercise of parental responsibility and that guarantee the rights of children and adolescents, as well as promoting their development and well-being. Thus defined, the **positive and responsible exercise** of parenting means being able to get involved in the upbringing of children, with practices based on affection, support, communication, stimulation, and the establishment of limits and rules, without using any type of violence (Rodrigo et al., 2015).

This definition of parenting, and what the positive and responsible exercise of it entails, is based on **evidence-based theories** in the understanding of parenting, which include contributions from neuroscience, attachment theory, social learning theory, transactional models, parenting styles theory, human ecology model, vulnerability and resilience models, and co-parenting theory (Asmussen, 2011; Hoghughi, 2004).

In addition, in this understanding of parenting, together with the theoretical assumptions described, there is a strong commitment to a **rights perspective**. This perspective implies, firstly, taking the rights of children and adolescents as a starting point, agreeing with the principle of the best interest of the well-being of children and adolescents, as well as recognising their role as active subjects of change, in the social spaces in which they develop (Council of Europe, 2011; United Nations, 1989). Secondly, this perspective considers the rights of children/adolescents and family well-being, as compatible and interdependent aspects (Thieman and Dall, 1992), in line with the principles of the

philosophy of family preservation (Rodrigo et al., 2008), so that a positive exercise of parenting benefits both children, and parents, and can only be defined as positive if it is exercised for mutual benefit (Daly, 2007). Finally, this perspective of rights implies assuming a dialogical vision about the processes of change and learning, from which the voice of the children, adolescents, and parents themselves, acquire a fundamental role (Racionero and Valls, 2007).

Implicit in the definition of parenting presented here, is an **understanding of the family** consistent with developmental, transactional, and ecological-systemic assumptions. From the developmental context, the close reciprocal relationship of people, with the contexts in which they develop, and the changing nature of these relationships, with age and other social and historical circumstances, are recognised (Lerner, 1986). Therefore, the developmental-educational needs of family members, particularly children and adolescents, are located as the central axis of parenting. From the transactional approach, the multidirectional nature and dynamism that characterise family relationships stand out, so that the interactions between family members, as well as those of the family within its environment, are mutually influential and, in addition, change over time (Sameroff & Mackenzie, 2003). The systemic approach recognises that the different members of the family are interconnected in such a way that, a change experienced by one of them, has repercussions on the others, that the family is made up of different relational subsystems (marital, parental and fraternal), and that it is open to outside influences (Minuchin, 1985). Finally, the ecological model places the family as the first microsystem of the individual's ecological environment and, therefore, as the first context of development, in constant interaction with the rest of the structures that make up the ecological environment (Bronfenbrenner, 1979).

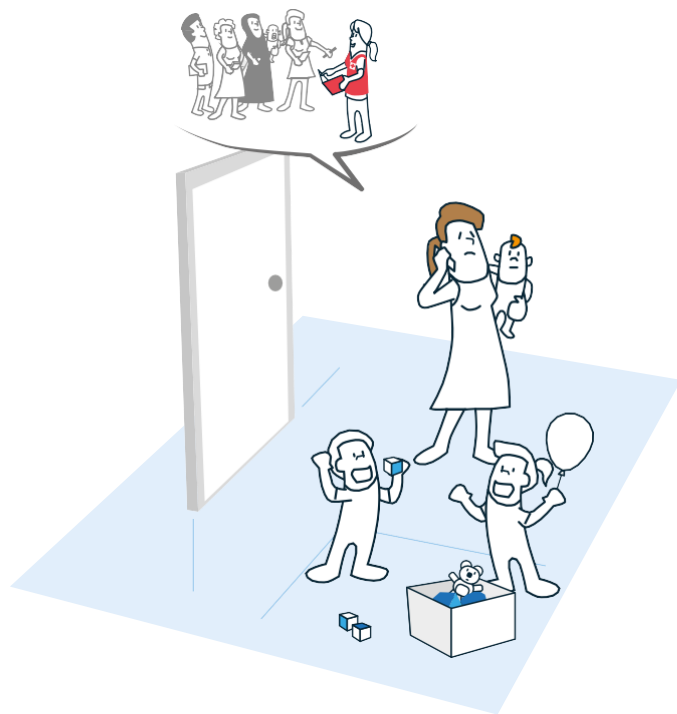
From this conceptualisation of parenting, and the understanding of the family as a context of development, it should also be noted that the **parental figures**, to which the competencies assessed in this tool refer, are not limited to parents but, in accordance with the most current consensual conceptualisations about what we

understand by family (Rodrigo and Palacios, 1998), parenting is the responsibility of all adults responsible for guaranteeing the rights of children and adolescents, as well as promoting their potential development and well-being, regardless of their biological link (Daly et al., 2015). In this regard, the adults involved in the upbringing and education of a child, or adolescent, should form a true parental team between themselves, sharing the tasks and functions derived from parenting from co-parenting (Rodrigo et al., 2015; Sullivan, 2008).

Once the way in which parenting and a positive exercise of it are conceptualised in this tool are described, and the conceptual foundations of the family, as a context of development have been located, it is worth specifying what is meant by **competency**. In this regard, the notion of competence referred to in the Interview for the assessment of Parental Competencies (ECP-12), reflects a multi-dimensional and broad vision of this construct. Thus, on the one hand, we understand that a competent exercise of parenting includes behavioural, affective and cognitive components (Coleman & Karraker, 2000), related to both educational skills and personal resources (Hoghughi, 2004). On the other hand, the said competent exercise is not limited to a specific and timely parental action, but implies an adequate exercise of parenting in a sustained manner, over time, and in different situations (Conley, 2004).

Considering the notion of parenting, and the understanding of the family, described in the previous

paragraphs, the vision of what a competent exercise of parenting entails requires incorporating three additional considerations. The first consideration refers to the need to adopt a **plural approach** which recognises that there is no single standardised way of exercising the role of parent, and that validates the diversity of ways of exercising parenting (Daly, 2007). The second consideration insists on the **situational nature** of the exercise of the parental role, insofar as the said exercise of that role in the developmental-educational needs of children and adolescents, must be adjusted to the family circumstances that are changing, and to what is expected from adequate parenting in each socio-culture (Azar & Cote, 2002; Department of Health, 2000; White, 2005). According to the above, the assessment of parental competencies must be carried out in terms of function, examining the exercise of parenting within the daily life of each family (Budd, 2005). In addition, all of the above insists on adaptability, as a central and backbone component in the consideration of a competent exercise of parenting, understood as sufficient flexibility to adapt to the changing requirements in the performance of the role of parent (Azar, 2002). The third consideration recognises that the exercise of parenting is an activity for which **support is needed** (Daly, 2007), so the use of opportunities, the search for resources and the acceptance of the support provided by systems and contexts of influence of the family, to deploy parental competencies, are very relevant aspects in its assessment (Rodrigo et al., 2008).





4

DESCRIPTION OF THE ECP-12

The Interview for the assessment of Parental Competencies (ECP-12) assesses twelve **fundamental competencies** for a positive and responsible exercise of parenting. For each of the twelve competencies, and as a result of the construction process of the tool described above, there is a set of indicators that allow the competencies

to be assessed through observable **indicators**. The table below defines the parental competencies assessed by the ECP-12 and identifies the number of indicators associated with each competence. Each parental competence has been assigned an acronym to facilitate its identification.

● 1. Stimulation and structuring (SS)

8

It refers to all the behaviours and actions of parents aimed at promoting and optimising the full development of the children and adolescents. These actions include both providing opportunities of formal and informal learning and the direct involvement of parents in enriching interactions with children and adolescents that promote their development. Likewise, for the promotion of development,

it is considered necessary to structure the daily living through routines and healthy habits. The full stimulation of development includes the psychomotor, cognitive-linguistic and socio-emotional aspects that allow acquiring a progressive autonomy and training. It is considered that the most adequate stimulation is that which best fits the specific characteristics of each child or adolescent.

● 2. Shared family time (FAM)

3

It refers to the actions that the parents carry out to organise the daily living of their children and adolescents ensuring that such actions include shared time in family, both in daily routines and in leisure activities.

It is important for these shared activities to be adjusted to the characteristics and preferences of the different members of the family, in order to allow everyone to enjoy such shared time.

● 3. Co-parenting (CO)

4

It refers to the capacity that adults with children and adolescents in their care to establish a true parental team, co-operating between them in all the matters related to their upbringing and education. This competence implies the capacity to establish a good parental alliance between the parents and guardians of children and adolescents. This co-responsibility between parents and guardians

involves both an adequate and satisfactory distribution of tasks and the capacity to reach agreements in decision making. Parental co-responsibility can be valued regardless of the family structure. Thus, the support, respect and co-operation that a good parental alliance implies can be observed in both two- and single-parent families, as well as between parents that coexist in the same home or not.

● 4. Adequate beliefs and expectations about the child's development (ABE)

3

It refers to the beliefs and expectations of the parents about the processes of child and adolescent development. These expectations are considered adequate when the parents feel that

they influence such processes and when their expectations are adjusted to the age and specific characteristics of their children.

● 5. Affection, communication and acceptance (ACA)

8

It refers to all those parental behaviours in the interactions between the parents and their children aimed at favouring a relationship based on affection, emotional warmth, communication, dialogue, involvement, accompaniment and interest for their children. These parental behaviours are considered

positive when the child or adolescent feels safe, loved, listened to, attended to, understood and accepted. This requires the parents to be flexible and to adapt to the individual characteristics of the child and to the circumstances around the latter.

● 6. School involvement (SI)

3

It refers to the parental behaviour related to engaging, accompanying and supervising children and adolescents in the school context. An adequate school involvement is considered when the adults

supervise the behaviour of their children at school, maintain a regular contact with the teachers and classmates and engage in the management of the school.

● 7. Rules and supervision (RS)

5

It refers to those actions carried out by the parents aimed at establishing rules and routines, as well as to the adequate management when the children do not comply with them. It is important for children and adolescents to participate and know the rules and limits they must respect from the beginning, as well as the associated contingencies.

This dimension includes the knowledge and supervision of leisure activities of the children. Lastly, the control and supervision practices must be consistent and adapted to each situation and to the individual characteristics of the child or adolescent.

● 8. Emotional self-regulation (ESR)

4

It refers to the capacity shown by the parents to respond to the demands of experience in the emotional spectrum in a socially tolerable and sufficiently flexible manner to ensure that such capacity is adaptive. This adaptive response

implies that the parents express and understand their emotions adequately, showing proper control and management over the latter. Moreover, this capacity requires the parents to understand and accept the emotions of their children.

● 9. Adequate perception of the parental role (APP)

5

It refers to the extent to which the parents show an adjusted perception of their role as parents. That is, it evaluates the existence of a realistic perception of their own capacities for the upbringing of their children, showing confidence in such capacities.

Moreover, it evaluates the extent to which the parents feel satisfied with the duty of being parents and to what degree they see that this duty plays a central role in the definition of their identity. The adults know the difficulties associated with the exercise of parenting.

● 10. Stress coping strategies (SCS)

3

It refers to the deployment of adaptive actions by the parents during the process of coping stressful situations related to parenting. This process implies becoming aware of the situation, and

managing it through cognitive, emotional and behavioural strategies that help the parents to face the stressful situation effectively and satisfactorily.

● 11. Social support (SOS)

4

It evaluates the support received by the parents regarding the upbringing of their children. Therefore, this dimension includes the capacity to search and access different, significant, and useful sources of support in the upbringing of children, as well the reciprocity in the received support.

Similarly, it reflects the extent to which the received support allows covering the existing support needs in an effective manner. The search for support implies motivation for the improvement of the parental competencies.

● 12. Household management (HM)

3

It evaluates the competencies of the parents to efficiently manage the tasks related to household organisation.

Specifically, it assesses the safety, management, cleaning and order in the household.

The ECP-12 allows the assessment of the 53 indicators which correspond to the 12 parental competencies described. The assessment of these indicators is **carried out by the professionals** responsible for caring for families and, therefore, the tool is applied through expert judgment. As we will see below, the designed interview allows us to address the different competencies, which are the object of assessment, through a script organised by theme (How does a day in the life of your family look like?, What time do you spend together?, etc.). For each topic addressed in the interview (which corresponds to a competence), a general question appears at the beginning (in bold) and a set of more specific questions (in grey) that allow the specific indicators of the corresponding competence to be assessed. Thus, there are 12 general questions, one for each parental competence which this tool assesses.

The more specific questions are presented as a guide, and it is not necessary to ask them if the required information has already been obtained with the more general questions. Similarly, if necessary, other questions can be added to assess the indicators. This assessment tool incorporates some support images which will be used throughout the interview to facilitate the approach to some of the contents. The semi-structured interview consists of a natural and non-intrusive conversation, in which the person does not feel that they must answer questions that they do not want to. The specific questions are guidelines for the professional to explore the different dimensions of parenting. Next, the script of the Interview for the assessment of Parental Competencies (ECP-12) is presented.

Interview for the assessment of Parental Competencies (ECP-12)

1. **How does a day in the life of your family look like? What do your children do from the time they get up, until they go to bed?**
 - 1.1. What time do they usually get up? What do you usually have for breakfast? How do they go to school?
 - 1.2. Where, and with whom, do they eat lunch?
 - 1.3. What do they do in the afternoons? Do they go to any extracurricular activities? Do they practice any sport?
 - 1.4. Do they shower every day? At what time? What time do they have dinner and with whom? What time do they go to bed?
 - 1.5. When are you with them? Do you sit down to play a lot with your children? What do you play with them? Do you often read stories with them? Do you like them to interact with other children?
 - 1.6. What do they like to play? What kind of toys do they have? Do they have bicycles or scooters? Puzzles or stories? Paintings or crafts? Any musical instrument?
 - 1.7. What things do you take into account when buying toys? How do you decide which activities to sign them up for?
2. **Now I would like you to tell me about the time the whole family spends together. At what time of day are you all together?**
 - 2.1. Do you all do something together every day? And the weekends?
 - 2.2. What do you like to do together?
 - 2.3. Can you remember any situation, or moment, in which you have all had fun together in the last few days?
3. **In the case of your children, which adults participate and are you responsible for their upbringing and education?**
 - 3.1. How do you organise taking care of the children? Who is in charge of each task?
 - 3.2. Who decides things that have to do with the children, and how?
 - 3.3. What do you do when you disagree? Do you discuss these topics a lot?
 - 3.4. How do you see the other as a mother/father/grandmother/grandfather?
 - 3.5. Are you happy with how you organise yourself regarding the children?

4. **Now I would like to know your opinion about the importance of the family. Do you think that parents can influence what their children are like?**
 - 4.1. In what aspects can they influence the most? And how?
 - 4.2. For example, what can parents do to make a child behave well? And to do well in school? And so that they learn to relate to other children?
 - 4.3. Do you think it is good to make demands of children so that they learn and mature? In what things are you the most demanding? And how do you do it?

5. **Now I would like you to tell me a little more about your child. *[In the case of having more than one child, ask them to think about the one the intervention will focus on]* What is your child like? Tell me the 5 things that best define them.**
 - 5.1. Would you like your child to be very different from how your child is? What would you like to change?
 - 5.2. What things does your child like to do? Do you know your child's friends well?
 - 5.3. How would you describe your relationship with your child?
 - 5.4. What things do you do to show your child that you love them? Does your child like these displays of affection?
 - 5.5. Would you say that there are times when it is difficult for you to be respectful and affectionate with your child? What are they? How often does it happen?
 - 5.6. If someone (a teacher, a neighbour, etc.) calls you to tell you that your child has misbehaved, what do you do? How do you usually react in such cases? Do you get upset, or are you able to talk calmly with your child?
 - 5.7. Do you usually talk a lot with your child? At what times of the day? Who usually starts the conversation?
 - 5.8. How do you usually talk to your child? Do you usually talk to them angrily, or do you address your child with affection? Do you usually listen, and always pay attention to what your child tells you?
 - 5.9. Would you say that your child trusts you? For example, if your child has a problem, do they come to you and tell you, so you can help?
 - 5.10. Think about the last time your child needed something from you (for example, if your child had a problem with friends or asked you for help because your child could not do something on their own). What do you do in those cases? Do you always act the same when your child needs your help?

6. **Next, I would like you to think about your child's school behaviour, how are they doing at school?**
 - 6.1. Regarding homework, does your child need your help? Do you review everything your child does?
 - 6.2. Do you usually talk to the teachers? And with their classmates?
 - 6.3. Do you go to the school a lot? Why do you usually go?

7. **Relationships with children are not always easy. Now I'd like us to talk about the more complicated part, the issue of getting them to behave as we would like.**
 - 7.1. Are there rules at home? How do you decide? What happens if the children do not obey them?
 - 7.2. If I had the opportunity to talk to your children, could they tell me what those rules are? Do you usually let them know in advance what can happen if they break the rules?
 - 7.3. When you decide to apply a punishment, are you usually firm in the decision, or do you forgive them easily?
 - 7.4. How do you control what your child is doing when you cannot keep an eye on them? (For example, if they are older, when do they go out of the house?, if they are small, when do they watch TV?).
 - 7.5. Specifically, what rules do you have for the use of video consoles, tablets and mobiles?
 - 7.6. Are the rules the same for all your children? Do the rules change with age?

8. **As we have just discussed, all children misbehave at times. Here you see a series of situations in which children have misbehaved. I would like you to think if you identify with some of these situations.** *[To answer these indicators, images will be used. The interviewer can use all the images necessary to collect the information]*
- 8.1. How did you feel in that situation?
 - 8.2. Did you know how to convey how you felt?
 - 8.3. If you had your child in front of you in this situation, what would you say?
 - 8.4. Sometimes it is hard not to lose your temper in these situations, what do you think?
 - 8.5. Why do you think your child behaved like this? Do you usually understand why they misbehave sometimes? How do they feel in those situations? Is it easy for you to put yourself in their situation?
 - 8.6. When your child tells you to leave them alone, or gets angry and yells at you, tells you that they do not love you and, tries to hit you, even when they are little, what do you do in those cases? How do you react?
9. **Now I would like you to tell me about yourself as a parent. How do you see yourself? What would you say are your best and worst qualities?** *[To answer these indicators, images will be used].* **Look at these images, very different parents are represented. In image "A" we see a parent who feels capable of anything, who will be able to face any problem, feels like a superhero. In image "B" we see a parent who feels that they are not capable, even seem to have thrown in the towel. In image "C" we see a parent cooking / practicing sports, it seems that they are better at it and enjoy doing other things more than being a parent. None of these images are real, but which of them would you say you identify with the most?**
- 9.1. Do you feel capable of facing any situation that has to do with raising your children?
 - 9.2. The truth is, the education and upbringing of children is not an easy task. What would you say are the most important difficulties for you?
 - 9.3. Do you spend time thinking about these things? Do you often stop to think about how you can improve as a parent?
 - 9.4. What are you trying to do to improve as a parent? Would you sign up for a school for parents?
 - 9.5. Despite the difficulties, would you say being a parent is something that fills you with satisfaction? What gives you happiness? Or, would you rather be doing something else, like the parent in the image?
10. **The truth is that being a parent is not an easy task. Other parents I have spoken with tell me that sometimes they feel they are not going to make it to the end of the day. Does this also happen to you sometimes, do you feel overwhelmed trying to move everything forward (children, work, home, etc.)?**
- 10.1. Does this feeling of not being able to cope with everything happen to you often, or do you generally consider yourself a decisive person?
 - 10.2. Could you give me an example of a situation that has weighed you down or overwhelmed you, tell me the last time it happened to you?
 - 10.3. Is it easy for you to recognise these situations, when you feel weighed down or overwhelmed?
 - 10.4. How do you know you are overwhelmed? What is it that provides you with the alarm signal?
 - 10.5. In those situations, what do you do? What works for you? Could you give me some examples?
 - 10.6. Is it very difficult for you to overcome yourself in these situations, when you feel overwhelmed?

11. When you need help as a parent, what do you do?

- 11.1. Who do you ask for help? Who do you count on? Where do you go?
- 11.2. Is there anything these people cannot help you with?
- 11.3. Have you ever needed to go to a professional for any of these issues? Would you know who to turn to?
- 11.4. Conversely, who comes to you for help on these issues?
- 11.5. Do you like them to do that?

12. To finish, I would like you to tell me a little about your home. What is your home like? Do you like to raise your children there?

- 12.1. Would you say it is safe? For example, is there a secure place where you can keep dangerous things like medicines or cleaning products?
- 12.2. When something breaks, does it take a time to fix it?
- 12.3. Do you spend a lot of time cleaning the house? How often?
- 12.4. When you have to look for something, is it easy for you to find it because things are usually in their place?
- 12.5. Do you have different places to do different things? For example, do the children have a place to do their homework?

The information obtained, thanks to this interview, should allow the interviewer to rate the 53 indicators of the ECP-12. Each of the indicators has to be scored, according to the instructions offered, and the opinion of the professional, on a scale that ranges from 1 (*competence is completely absent*) to 5 (*competence is present in its entirety, reflected*

in all facets), with 3 occupying an intermediate position (*competence is partially present*).

To facilitate the scoring that the interviewer has to make of each of the 53 indicators, corresponding to the 12 competencies assessed by the ECP-12, a description of all the indicators is presented below, as well as their extreme and intermediate values.



Description of the ECP-12 indicators

1. Stimulation and structuring (SS)

It refers to all the behaviours and actions of parents aimed at promoting and optimising the full development of the children and adolescents. These actions include both providing opportunities of formal and informal learning and the direct involvement of parents in enriching interactions with children and adolescents that promote their development. Likewise, for the promotion of development, it is considered

necessary to structure the daily living through routines and healthy habits. The full stimulation of development includes the psychomotor, cognitive-linguistic and socio-emotional aspects that allow acquiring a progressive autonomy and training. It is considered that the most adequate stimulation is that which best fits the specific characteristics of each child or adolescent.

SS.1. The parents organise the daily living of the children and adolescents with routines and healthy habits related to food, hygiene, physical activity and sleep

5 = Totally

The parents are concerned with maintaining healthy routines and habits in all aspects of their children's' lives. For example, in relation to food, children and adolescents eat four meals a day at similar times, have a varied diet and do not consume unhealthy foods (pastries, soft drinks, sweets, etc.). Similarly, children and adolescents bathe daily, perform some physical activity and go to bed at approximately the same time every day, sleeping sufficient hours, according to their age.

**3 =
Intermediate
level**

The parents maintain routines, but they are not always appropriate, and/or maintain healthy habits only in relation to some issues. For example, children and adolescents bathe every day and go to bed at the same time, but the schedule is not appropriate because they do not sleep for enough hours. They have schedules for meals, but they do not have an adequate diet (they usually eat pastries for breakfast and a lot of fast food).

1 = Nothing

Children and adolescents lack routines or maintain habits which are clearly detrimental to their health: poorly varied diet, with excess fat, sweets and/or fast food, lack of hygiene, etc

SS.2. The children and adolescents participate in regulated and stable leisure or stimulation activities

5 = Totally

Children and adolescents regularly carry out extracurricular activities requiring a high level of involvement (with a fixed time per week), stimulating facets of development less promoted at school, and which do not necessarily imply an economic cost. For example, they are part of a municipal sports team, they go to the music conservatory, they are part of the musical band in their town or they go to painting classes in their district.

**3 =
Intermediate
level**

Children and adolescents carry out extracurricular activities which do not stimulate competencies that are very different from those promoted at school and/or those requiring little involvement. For example, children and adolescents stay at school two days a week for an extra hour in the play centre.

1 = Nothing

Children and adolescents do not participate in any activity of this type.

SS.3. The children and adolescents participate in stimulating activities and routines promoted by the parents

5 = Totally	The parents ensure that the daily life of their children contains routines and activities which stimulate their development, both in and outside the home. For example, they worry that they have adequate schooling, regularly play educational games with them at home, frequently take them to cultural activities, etc.
3 = Intermediate level	Children and adolescents participate in some stimulating activities but, apart from school, they do not participate in them on a daily basis, and they are not very varied. For example, the parents often take their children and adolescents to the park or to shopping centres, but have rarely taken them to visit a monument or a museum.
1 = Nothing	Children and adolescents do not participate in stimulating activities on a regular basis, they do not even go to school regularly.

SS.4. The parents offer their children activities that facilitate their psychomotor development (physical activities, sports, etcetera)

5 = Totally	The parents encourage their children to participate in activities which promote their psychomotor development inside and outside the home. For example, they buy them toys such as balls or tricycles, go on excursions to the countryside, go cycling frequently, and sign them up for extracurricular sports activities, etc.
3 = Intermediate level	The parents encourage the participation of their children in some of these activities, but moderately. For example, they have toys of this type at home, but family leisure activities are not usually related to sports or physical activity.
1 = Nothing	The parents do not encourage the participation of their children in any activity of this type.

SS.5. The parents promote activities that facilitate the cognitive-linguistic development of their children (reading stories, educational games, etcetera)

5 = Totally	The parents encourage their children to participate in activities which promote their cognitive-linguistic development, inside and outside the home. For example, they buy them educational toys, read to them every night, visit places, such as science parks, sign them up for extracurricular activities, such as chess, etc.
3 = Intermediate level	The parents encourage the participation of their children in some of these activities, but in a moderate way. For example, children have educational toys, but the parents rarely ask them to play with them, and/or leisure activities are always related to sports or physical activity.
1 = Nothing	The parents do not encourage the participation of their children in any activity of this type.

SS.6. The parents provide their children with experiences that promote their socio-emotional development (interactions with peers)

5 = Totally

The parents encourage their children to participate in activities which promote their socio-emotional development, inside and outside the home. For example, they take them to the park to interact with other children, help them understand their emotions and those of others, resolve conflicts with other children by putting themselves in their situation, encourage them to be increasingly autonomous, etc.

**3 =
Intermediate
level**

The parents encourage the participation of their children in some of these activities, but it is not common for them to use them to promote social skills or promote emotional development. For example, they usually take them to the park or invite other children home to play with them, but they do not take advantage of these situations to teach them how to relate to others, or how to control their own emotions.

1 = Nothing

The parents do not encourage the participation of their children in situations or experiences which favour the development of socio-emotional skills.

SS.7. The children and adolescents have access to varied and stimulating toys and materials that fit their age and development level

5 = Totally

The parents ensure that children and adolescents can have access to varied and stimulating materials, inside and outside the home, appropriate for their age and developmental stage. For example, they have a variety of toys (physical activity, educational, role-playing), books and stories, musical instruments, technological devices (computers, video consoles), and they go to libraries, toy libraries, etc. These toys are also age appropriate. For example, babies have toys which stimulate perception and body control (mobiles, walkers); small children have toys for the development of psychomotor skills and language (puzzles, construction games, stories); and, the older children have educational toys which promote learning and adjust to their preferences. The video games which children and adolescents have are, in all cases, appropriate for their age.

**3 =
Intermediate
level**

Children and adolescents have a certain variety of toys, but they do not have less common stimulating materials at home (musical instruments, modelling materials, etc.) and/or do not have access to them outside the home. This level would also be scored if children and adolescents have some appropriate toys, and others that are not, or these do not fit their preferences. For example, for a 3-6 year old child, having some appropriate toys (balls, bicycle, stories, dolls, etc.) but sharing the video games of their 8-10 year old sibling, or not having of some type of game especially important for their developmental stage (they do not have any puzzle or block or assembly toys).

1 = Nothing

Children and adolescents do not have access to toys or varied and stimulating materials, or these are not appropriate for their age and level of development.

SS.8. The stimulation experiences provided by the parents are enriching and fit the specific characteristics of the children and adolescents

5 = Totally	All the activities that the parents propose to their children are enriching, appropriate and adjusted to age, level of development and personal characteristics. For example, before buying a toy, or taking them to an extracurricular activity, they stop to think if it is suitable for their child, they check what age it is recommended for, whether it fits their preferences and if it suits them, based on what they are like.
3 = Intermediate level	Children and adolescents participate in some enriching activities and experiences appropriate for their age and characteristics, and others which are less so. For example, children and adolescents have age-appropriate toys, but often watch television when their parents are watching programmes for adults; or, situations in which parents involve their children in many activities, whether or not they suit their preferences.
1 = Nothing	Children and adolescents are continually exposed to situations which are neither enriching nor appropriate for their age or personal characteristics.

2. Shared family time (FAM)

It refers to the actions that the parents carry out to organise the daily living of their children and adolescents ensuring that such actions include shared time in family, both in daily routines and in leisure activities.

It is important for these shared activities to be adjusted to the characteristics and preferences of the different members of the family, in order to allow everyone to enjoy such shared time.

FAM.1. All the members of the family participate in group activities (dining, watching a film, going for a walk, playing, chatting, etcetera)

5 = Totally	All the members of the family meet every day at some point of the day and carry out a daily activity together, in such a way that it becomes a family habit (for example, they always have dinner together and watch TV for a while before going to bed).
3 = Intermediate level	All family members usually meet and do some joint activities several times a week. For example, they always eat together on Sundays and some weeknights.
1 = Nothing	There is no habit of doing any daily activity together. Activities involving all family members are carried out very sporadically.

FAM.2. All the members of the family participate in playful or leisure activities (going to the cinema, visiting relatives, going on a trip, etcetera)

5 = Totally	All the family members undertake some shared leisure activity at least once a week. For example, they always go out together on Sunday mornings and go to the park, to the cinema, or to visit the grandparents.
3 = Intermediate level	The family carries out shared leisure activities (going on excursions, going to the cinema or visiting a relative) once or twice a month.
1 = Nothing	Shared leisure activities are never carried out or are done so very sporadically.

FAM.3. The family enjoys doing things together

5 = Totally	Family members enjoy doing things together, whether routine or leisure activities. They like to carry out different daily activities and share hobbies in their free time. For example, they try to adjust each other's schedules to coincide with everyone at dinner time, they prefer to watch a movie all together, instead of each one watching it on their own, or they try to find leisure activities at weekends, which everyone likes, and allows them to be enjoyed together.
3 = Intermediate level	Family members enjoy doing some things together, but not others. For example, they have a good time when they go out, but at home they do not enjoy daily life together; or they enjoy doing some daily activities together, but they do not share hobbies or enjoy shared leisure activities.
1 = Nothing	The family does not share moments that are satisfactory for all its members.

3. Co-parenting (CO)

It refers to the capacity that adults with children and adolescents in their care to establish a true parental team, cooperating between them in all the matters related to their upbringing and education. This competence implies the capacity to establish a good parental alliance between the parents and guardians of children and adolescents. This co-responsibility between parents and guardians involves both an adequate

and satisfactory distribution of tasks and the capacity to reach agreements in decision making. Parental co-responsibility can be valued regardless of the family structure. Thus, the support, respect and cooperation that a good parental alliance implies can be observed in both two- and single-parent families, as well as between parents that coexist in the same home or not.

CO.1. The adults who coexist in the same home share the duties of upbringing and education of their children and adolescents

5 = Totally	<p>The daily tasks related to the care of children and adolescents are distributed equally among the adults who live in the home. For example, in a two-parent family, the father is in charge of taking them to school in the morning and bathing and putting them to bed at night, while the mother picks them up from school and spends the afternoon with them. In the case of a separated mother who lives with the maternal grandmother, the grandmother looks after the morning care, while the mother does it when she returns from work in the afternoon.</p>
3 = Intermediate level	<p>A large part of the daily tasks are assumed by one of the adults who live in the home, and the other only participates in a specific task on a regular basis. For example, in a two-parent family, the father is only in charge of putting the children to bed at night, and the mother is in charge of everything else. In the case of a separated mother who lives with the maternal grandmother, it is the latter who assumes most of the care tasks, and the mother is only in charge regarding the school.</p> <p>In the case of joint custody, this level would be scored if there is an equal distribution of tasks in one of the households, but not in the other.</p>
1 = Nothing	<p>All the daily tasks are assumed by only one of the adults who live in the home, the other adults not participating in the usual care of children and adolescents.</p>

CO.2. The parents agree in the matters related to the education of their children

5 = Totally	<p>The parents talk to each other and agree on everything related to the education of the children: parenting practices, rules, educational style, etc. When a conflict arises related to raising children, they resolve it by mutual agreement. There is a high congruence between the attitudes and educational practices of the parents.</p>
3 = Intermediate level	<p>The parents agree and maintain agreement on some issues related to the education of their children, but not on others. For example, they may agree on parenting practices but disagree on disciplinary practices, and act differently when the child misbehaves.</p> <p>This level would also be scored when most of the decisions are made by one of the parents, but this situation is not a reason for disagreement or conflict. In the case of divorced couples, this level would be scored when each member of the couple makes different decisions, which are not the result of consensus, but which are accepted by the other party.</p>
1 = Nothing	<p>There is a clear disagreement between the parents in everything related to the education of their children. There is a significant inconsistency between the attitudes and practices of parents that is often a source of conflict.</p>

CO.3. The parents respect and support each other mutually in the exercise of parenting

5 = Totally	Each parental figure respects and values the other as a mother/father/grandmother/grandfather, feeling that they form a good "team" for everything related to the upbringing and education of their children. They make a clearly positive assessment of the other in this facet, explicitly mentioning some of their qualities, and showing confidence in their parental competencies. The other parental figure(s) are an important source of support in everything related to the upbringing and education of the children.
3 = Intermediate level	<p>The parents are moderately respected and supported. For example, some of the competencies of others, such as a father/mother/grandmother/grandfather, can be valued while mentioning that they are not trusted for other things, or recognise their worth but not feel supported by them. There is no perception of a true "team".</p> <p>This level would also be scored when, in the case of more than two parental figures, one parental figure is respected and valued (for example, the grandmother/grandfather with whom one lives and who actively participates in raising the children) but not another (for example, the ex-husband/wife).</p>
1 = Nothing	The parents do not show any kind of respect or agreement between themselves. They openly criticise each other as a father/ mother/grandmother/grandfather and/or are undermined in front of the children. More than a source of support, the other parental figure(s) turns out to be a source of stress and conflict.

CO.4. The parents feel satisfied with how they cooperatively manage the matters related to the education of their children

5 = Totally	The parents are very satisfied with how they have divided the tasks of caring for their children among themselves. The issue of raising and educating children is not usually a reason for discussion between them.
3 = Intermediate level	<p>The parents are moderately satisfied with the distribution of tasks. For example, they say that the distribution is not ideal but they understand that their circumstances (for example, due to work issues or being separated) do not allow any other form of distribution.</p> <p>This level would also be scored when issues related to raising children are sometimes a reason for discussion and/or they do not know how to manage it satisfactorily. In the case of multiple parents, a score at this level would be when there is satisfaction with the sharing of tasks with one of the parents (for example, with the involvement of a sibling who lives with a separated mother) but not with another (for example, with the ex-husband).</p>
1 = Nothing	<p>Everything related to the tasks of caring for and educating the children is a source of permanent conflict between the parents.</p> <p>In addition, the adults state that they feel very dissatisfied with the distribution of tasks.</p>

4. Adequate beliefs and expectations about the child's development (ABE)

It refers to the beliefs and expectations of the parents about the processes of child and adolescent development. These expectations are considered adequate when the parents feel that

they influence such processes and when their expectations are adjusted to the age and specific characteristics of their children.

ABE.1. The parents believe that their way of acting as parents influences the development of their children

5 = Totally

The parents believe that the way they act and educate their children greatly influences how they are and how they behave. They also know to what extent they can influence, and how to do it. They show that they know that the development of their children depends on the fact that they provide them with stimulating experiences, but that it also depends on their own heredity ("I think talking to them and singing to them helps them learn to speak, although each child has their own rhythm"; "it is true there are children with a lot of genius, but setting limits from the beginning is essential for them to behave well").

**3 =
Intermediate
level**

The parents recognise the influence of the actions of fathers and mothers on child and adolescent development, but they do not have precise knowledge about to what extent it can be influenced, or how to do it, or adults think that they can influence some aspects, but not others. For example, they may give responses which reveal excessive environmentalism ("parents can make a child be exactly what they want"), in which they limit their influence to the selection of stimulating contexts ("What you have to do is send them to a good school and avoid bad company.").

1 = Nothing

The parents do not recognise their role and influence on child development. They hold completely innate beliefs ("every child is what they are, based on their heredity") or attribute it to chance ("it is a matter of luck that a child turns out one way or another").

ABE.2. The parents consider that what happens in the family influences the development of their children at school and in other contexts

5 = Totally

The parents know that they can have a lot of influence on children and adolescents doing well in school, or other contexts, and they know specific strategies on how to achieve it. For example, they know that, for them to do well at school, it is important to read with them, or set a daily schedule for them to do their homework. Similarly, they know that for them to learn to interact with other children, it is important to take them to the park, invite other children home, etc.

**3 =
Intermediate
level**

The parents believe what happens in the family is important for their children to do well in school, or other contexts, but they do not know many specific strategies on how to achieve it. In fact, when asked what they do, the parents answer generalities, such as "help them", but they are not able to specify.

1 = Nothing

The parents do not give any importance or responsibility to the family, in relation to the adaptation of children and adolescents to school or other contexts. They think that what happens in these contexts does not depend on them, or what they do.

ABE.3. The parents believe that it is good for the development of their children to give them attainable challenges based on their age and capabilities

5 = Totally

The parents recognise the importance of requiring children and adolescents to make an effort to achieve new goals, as a strategy to promote development and learning, and they know how to do so by adjusting to their age and level of development. When asked about this aspect, they mention at least two specific aspects in which they make maturity demands, adjusted to their age and characteristics ("I try to get him/her to eat without help, but he/she is still small and makes quite a mess", "I ask him/her to get better grades because I know he/she can").

**3 =
Intermediate
level**

The parents think that demands must be made of children, but they do not show very precise knowledge about how to do it and/or the challenges posed are not realistic or achievable for their age or level of development. For example, they can make the same demands on all their children, but without taking into account the specific abilities of each one ("I only ask him to get the same grades as his sister"). Or they may say that it is important to be demanding with grades, but they are not directly involved in achieving it ("I always ask them at the beginning of the course to study and get good grades, but it's never the case"). Or they give examples of challenges that are not attainable ("I want her to take care of tidying up and cleaning her room, but she cannot even put away the clean clothes I leave on her bed").

1 = Nothing

The parents believe making demands of children and adolescents is negative for their development, and/or they do not know how to make demands of their children, according to their age and/or abilities. This lack of competence can come from a total lack of maturity requirements or, on the contrary, by demanding well above abilities.

5. Affection, communication and acceptance (ACA)

It refers to all those parental behaviours in the interactions between the parents and their children aimed at favouring a relationship based on affection, emotional warmth, communication, dialog, involvement, accompaniment and interest for their children. These parental

behaviours are considered positive when the child or adolescent feels safe, loved, listened to, attended to, understood and accepted. This requires the parents to be flexible and to adapt to the individual characteristics of their child and to the circumstances around the latter.

ACA.1. The adults recognise the value of their children

5 = Totally

The parents highlight at least three positive qualities or achievements of their children, and speak of them with pride and satisfaction ("he/she is very smart", "he/she is very affectionate", "he/she has a good heart", "his/her teachers speak highly of him/her", "they have been chosen captain of the football team").

**3 =
Intermediate
level**

The parents highlight at least one positive quality or achievement of their children, and refer to them with some satisfaction.

1 = Nothing

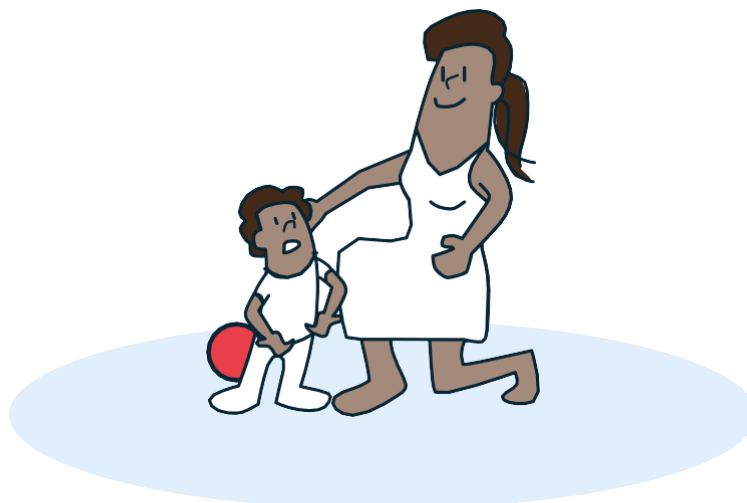
The parents do not highlight any positive quality of their children. They can refer to their children with negative and even derogatory names ("he/she is a disaster", "he/she is stupid", "I cannot say anything good about him/her").

ACA.2. The parents accept their children as they are

5 = Totally	The parents accept all the characteristics and peculiarities of their children. They firmly answer "no" to the question of whether they would like their children to change and be different.
3 = Intermediate level	The adults are only partially accepting of their children, acknowledging that they would like them to be different in some ways ("I love that my son/daughter is fun, although I don't like it that he/she is so restless").
1 = Nothing	The parents do not accept their children as they are. For example, they express the desire to have had a different child than the one they have now, or show some contempt when talking about what they are like.

ACA.3. The parents show interest for and are involved in their children's world

5 = Totally	The adults show interest in learning about and sharing everything related to their children's lives. Therefore, the parents are aware, accompany, and even participate in the daily activities of their children. For example, they know what activities their children enjoy the most, or are interested in how they are doing at school. They know and interact with their children's closest friends (for example, they talk to them on the phone or when they visit their house).
3 = Intermediate level	The adults show moderate interest in the interests of their children. For example, they know some of their tastes but not others, or they know their interests, but show no interest in sharing them together on a regular basis. For example, parents know that the child really likes a superhero but they do not take the initiative to go to the cinema together to see one of his films, or the adults are not always aware of what their children do outside the home.
1 = Nothing	The parents do not show interest in the life of their children, they do not know their tastes, or what they usually do in their daily life, they do not show interest in sharing their preferences, nor do they accompany them or participate in some of their activities.



ACA.4. The adults show affection toward their children, adjusting to their personal characteristics

5 = Totally

The parents offer their love and attention, unconditionally, to their children. For example, the parent attends to their child when they cry or needs something, does not condition their affection on the child's behaviour and does not withdraw their affection, even though they are angry with them. They address them affectionately, showing their affection with gestures (looks, caresses, smiles, hugs, kisses, etc.) and words (I love you, my love, the most beautiful, etc.), adapting the expression of affection to age, personal characteristics and circumstances. For example, parents may kiss and say "I love you" in public, to their youngest children, but with adolescents they reserve the physical expression of affection in the more private sphere. They may be more affectionate when their children achieve something that is the result of a lot of effort, than when success is by chance. The way in which parents express affection allows their children to feel loved.

**3 =
Intermediate
level**

The parents are affectionate with their children, but they only express affection in some situations. For example, if the child approaches, they hug them, but they do not usually do it on their own initiative. Another sign of a moderate level in the expression of affection would be, when the way in which affection is expressed, does not allow the children to feel comfortable. For example, the parents are continually kissing their child, even though they don't like it. It can also happen that adults feel close and love their children, but do not attend to them or show unconditional affection on all occasions. For example, the parents tends to attend to their child when they cry, but is often indifferent when asked to play with them, or is distant when the child misbehaves.

1 = Nothing

They appear distant and cold in their relationship with their children. For example, they do not remember the last time they told their child that they loved them, that they gave them a kiss, or a simple hug. When they speak to their child they may do so with contempt, or in an insulting manner. This level also includes lack of response, inappropriate responses or excessive involvement with the children and adolescents.

ACA.5. The parents use dialog and reasoning with their children as an educational strategy

5 = Totally

The adults talk to their children in a calm and collected way when they have to reach an agreement or resolve a conflict. In this interaction, an attempt is made to find out the different points of view of the parties involved, and a negotiated decision is made. For example, if the child behaves badly, the adult acts serenely and calmly, without insults or recriminations, they seek a dialogue with the child to understand what they may have gone through, and to find fair and proportionate agreements.

**3 =
Intermediate
level**

The adults do use reasoning to make decisions and solutions to conflicts with their children, on some occasions, and on others no. Sometimes adults behave authoritatively (imposing punishment, yelling) or indifferently (doing nothing about it), not encouraging dialogue and reasoning.

1 = Nothing

The adults never solve problems or promote reaching agreements through dialogue and reasoning. The behaviours of adults could be those, such as, indifference, authoritarianism or imposition, guilt, coercion to face possible conflicts with their children.

ACA.6. The parents promote communication in their relationships with their children in a cordial and respectful manner

5 = Totally	<p>The parents create daily spaces with their children which promote communication (for example, eating together or going for a walk) and in which adults encourage conversations about some topic (news, school, friends, television programmes, planning the day) and interact with them politely, courteously and respectfully. As a result, the parents have some daily conversation with their children on some topic of interest or current affairs, paying attention to their arguments and answering their questions. For example, adults ask their children every day how they did at school, and if they had fun at any time during the day. They listen attentively and ask about some curiosity in their story. With very young children, parents tell their child how things have gone and try to encourage their interest in conversations.</p>
3 = Intermediate level	<p>Adults and children have conversations on a regular basis, although these do not occur daily, or are not promoted, mainly by parents. Communication is usually cordial and respectful, although not in all situations. For example, parents do not usually have time to talk every day, although they do on weekends. Or adults and children have conversations on a daily basis, but usually initiated by the child or adolescent. Or the adults listen to their child but they do not always do so (if they are doing another task or activity at that moment), or on any subject (if they tell you something that has happened to them with their friends).</p>
1 = Nothing	<p>The adults are not concerned with creating spaces which favour communication with their children, nor with initiating conversations with them. They may even use mockery, humiliation, arrogance, insults, recrimination or ignorance, when addressing them. Parents do not usually talk about anything with their children, even if they share the same space. Or adults always address their children yelling at them, without listening to them, disrespecting them, denigrating them for giving their opinion ("you have no idea"), and/or constantly interrupting them ("shut up kid and don't bother me").</p>

ACA.7. The actions of the parents favour the building of trust between them and their children

5 = Totally	<p>The parents have strategies which promote trust in the parent-child relationship (they do not judge, listen actively, do not betray their trust, respect their privacy, grant responsibilities, accept their criticism, take their opinions into account). Adults are a fundamental source of support for their children. For example, if a child is stressed or worried, they look to their mother/father to help or calm them down.</p>
3 = Intermediate level	<p>The action of parents makes their children trust them, moderately. This may be because the adults have few strategies to foster a trusting relationship, or because they are a source of support for the children, only for some issues.</p>
1 = Nothing	<p>The action of parents does not encourage their children to trust them. The parents have not managed to establish a relationship of trust and security with their children. The parents are not a source of support for their children. For example, in the event that they need to talk to someone, they would not do it with them.</p>

ACA.8. The adults are available and respond efficiently to the needs of their children**5 = Totally**

The parents are available and, given the different needs of the children, the adults respond appropriately, providing them with the necessary help. They respond quickly to the needs of their children. For example, if a baby cries, they comfort them, if a child does not know how to do something, they just help them to achieve it, if a child needs to talk, they listen to them.

**3 =
Intermediate
level**

The parents moderately respond to the needs of their children. Thus, they are available to meet the most basic needs of children and adolescents, but not others that may seem less important to them. Or adults usually attend to the needs of children promptly, although sometimes they take a little time.

1 = Nothing

The adults do not show availability to meet the needs of their children. The needs of children and adolescents seem not to be covered by the parents.

6. School involvement (SI)

It refers to the parental behaviour related to engaging, accompanying and supervising children and adolescents in the school context. An adequate school involvement is considered when the adults

supervise the behaviour of their children at school, maintain a regular contact with the teachers and classmates and engage in the management of the school.

SI.1. The parents support their children in their school tasks**5 = Totally**

The parents support their children in everything related to school tasks, at the same time that they deepen their responsibility in this area. Thus, they are interested, know and help them organise their daily school tasks and, when necessary, sit down with them to help them. Another way to offer help would be to seek professional help (private tuition), when necessary.

**3 =
Intermediate
level**

The parents support their children moderately in relation to school tasks. For example, they are interested in the tasks they bring home, but do not always offer them the necessary help. Or they completely delegate help to an external figure (private teacher). It is also possible that the parents help their children with homework, but in a way that does not allow them to develop responsible behaviour in this area. For example, a mother or father does homework that their child does not know how to do, instead of helping them learn how to do it.

1 = Nothing

The parents are not interested or do not help their children in everything related to school tasks. Thus, they do not know if their children bring home homework from school, and do not help them do their homework or study the lesson, if they need help.

SI.2. The adults supervise the behaviour of their children at school

5 = Totally	The adults supervise their children's behaviour in all matters related to school. For example, they check their homework daily and ask about their day at school, every day.
3 = Intermediate level	The adults supervise some of their children's school-related behaviours. For example, they ask their children, every day, how they have done at school, but they do not usually supervise that the homework is done.
1 = Nothing	The adults are oblivious to the school behaviour of their children. They may even think that what happens at school, or college, is the business of the educational centre, and not theirs.

SI.3. The parents are actively involved in the school

5 = Totally	The parents personally know their children's teacher, they know the interior of the school, they attend all the meetings, they attend the school parties, and they actively participate in the actions carried out by the Parents' Association (assemblies and activities). They know most of their children's classmates, and have contact with some families. On some occasion, they have been class, and/or, course delegates, members of the School Council, members of the Parents' Association Board of Directors, or have been part of the co-operative of the school to which their children belong.
3 = Intermediate level	The parents do not maintain regular contact with the teachers, except if a problem arises, or they are scheduled for meetings. They only participate in school activities related to Christmas or end of year parties. They know some of their children's classmates. They are members of the Parents' Association, but do not participate in the assemblies or activities which it organises. They have never assumed functions of responsibility in the Parents' Association, School Council or School Cooperative.
1 = Nothing	The parents have not spoken on any occasion with their child's teacher, they do not attend meetings scheduled by the teacher, they do not attend activities organised at the school for families, they are not members of the Parents' Association, and have never actively participated in the organization and operation of the school. In addition, they do not know their children's classmates.

7. Rules and supervision (RS)

It refers to those actions carried out by the parents aimed at establishing rules and routines, as well as to the adequate management when the children do not comply with them. It is important for children and adolescents to participate and know the rules and limits they must respect from the beginning, as well as the associated contingencies.

This dimension includes the knowledge and supervision of leisure activities of the children. Lastly, the control and supervision practices must be consistent and adapted to each situation and to the individual characteristics of the child or adolescent.

RS.1. The adults establish clear rules and limits for their children

5 = Totally	Children have established rules at home, which they know and must respect. The adults talk to their children about what the house rules are, and make them aware of the consequences of breaking the rules. For example, if the child is under ten years of age, the adults can have these rules written somewhere in the house (living room, kitchen) to facilitate internalisation. Or when the child or adolescent breaks some rule at home, they sit down to talk about what happened, and ask questions, such as, what do you think about what has happened?, how do you think we should act now?
3 = Intermediate level	There are some minimum rules at home, although not all of them are clear and/or the children are not always made to face the consequences. For example, adults sometimes demand compliance with unknown family rules for their children. Or sometimes they do not forewarn their children of the consequences of their actions, because they are not foreseen.
1 = Nothing	There are no rules at home that the children must comply with, and if there are any, the children are not aware of them or their consequences. For example, children and adolescents do not have responsibilities at home, they can do what they want, and they have complete freedom for everything.

RS.2. The parents apply their disciplinary practices in a consistent manner

5 = Totally	When they establish a rule, the adults try to maintain it consistently. The parents follow through with a consequence (for example, taking away a toy) when their children break a rule. They are firm with the decision made and, except in very special circumstances, do not change their mind.
3 = Intermediate level	The adults remain firm or not with their disciplinary practices, depending on the moment and/or the circumstance. For example, sometimes the adult remains firm in the decision made about the consequence of not complying with the rule, but another day easily backs down, after the persistence of their child. It could also be that adults are firm on matters related to housework, but not on others related to going out with friends.
1 = Nothing	The parents are not consistent in their disciplinary practices. For example, they threaten something (not to buy something they want), when their children misbehave, but then never follow through. Or they easily give in to the requests, pleas and anger of their children, to forego the punishment. The cases in which there are no rules at home that children must comply with are scored at this level.

RS.3. The parents supervise what their children do in their free time

5 = Totally

The adults are aware of what their children do in their spare time or leisure and supervise such activities, inside and outside the home. For example, parents monitor where, with whom, and what their child is usually doing every afternoon.

**3 =
Intermediate
level**

The adults supervise the leisure and free time activities of their children on some occasions. For example, they do so with regulated activities outside the home, but not always with activities of a more informal nature, or within the home (they don't always know what their child is doing when they are alone in their room or go out with their friends).

1 = Nothing

The parents do not supervise what their children do in their spare time. They do not know the activities they carry out, nor the place or the people, with whom they share it.

RS.4. The parents supervise the use that their children make of new technologies

5 = Totally

The adults have provided specific rules related to the use of consoles, mobile phones or tablets. They monitor the time and use invested by their children in new technologies. They are aware of the content they access on the Internet, and the video games they use, and they are concerned that they make proper use of it. For example, they do not have access to video games for the mature, they control the time they dedicate to it, they are aware of who they have conversations with on social networks, etc. In addition, the adults have spoken with their children about the dangers of abuse or misuse of the Internet.

**3 =
Intermediate
level**

The adults establish certain rules related to the use of new technologies, but their supervision of their use is moderate. For example, adults can control the type of games their children play, but not the content they access on the Internet. There is a set time to use these devices, but the adults are not consistent in their compliance.

1 = Nothing

The adults do not establish rules related to the use of devices, such as mobiles, tablets and consoles, so their children are free to use new technologies when and how they want. Adults do not control or supervise the use they make of them, neither the time, nor the content.



RS.5. The parents apply their rules in a flexible manner to adjust to the characteristics of their children and to the circumstances

5 = Totally	<p>The rules and disciplinary practices of adults, in relation to their children, are adjusted to their age and personal characteristics. For example, the existing rules, as well as the consequences associated with their compliance, or not, have varied as the child has grown. Or, in the case of a hyperactive child, the control exercised by parents is different from that of their older sibling who does not present this difficulty.</p> <p>In addition, if the situation requires it, adults are flexible in complying with family rules. For example, they delay home time on a Friday night, if the child is celebrating a friend's birthday party that day. Or, they do not force their child to eat all the food on the plate, if they would have to eat something that they do not like.</p>
3 = Intermediate level	<p>The rules and disciplinary practices of the adults are moderately adjusted to the personal characteristics of the children and/or circumstances. For example, they are flexible in some circumstances and not in others, or for some rules but not for others. Or they demand the same school performance from all the children, regardless of their abilities.</p>
1 = Nothing	<p>The adults are characterised by excessive rigidity in complying with the rules, without adapting to the needs of children and adolescents, or to the circumstances.</p> <p>The absence of family rules would score at this level.</p>

8. Emotional self-regulation (ESR)

It refers to the capacity shown by the parents to respond to the demands of experience in the emotional spectrum in a socially tolerable and sufficiently flexible manner to ensure that such capacity is adaptive. This adaptive response implies

that the parents express and understand their emotions adequately, showing proper control and management over the latter. Moreover, this capacity requires the parents to understand and accept the emotions of their children.

ESR.1. The parents know how to identify and label their emotions

5 = Totally	<p>During the interview, the parents name at least three different negative emotions, referring to themselves. For example, they indicate feeling "angry", "sad" and "disappointed".</p>
3 = Intermediate level	<p>The parents are able to identify and name only some of their emotions. They identify at least two negative emotions.</p>
1 = Nothing	<p>The parents do not verbalise their own emotions during the interview. When they refer to their emotions, they use general labels, such as, "I'm terrible", "I feel terrible", without demonstrating the ability to discriminate between different emotions.</p>

ESR.2. The parents know how to adequately express and control their emotions, without negatively affecting the exercise of their parenting

5 = Totally

The parents know how to adequately express their emotions, proving to be a model for their children, regarding the expression of emotions. Faced with everyday problems or conflictive situations, adults are able to convey their feelings (sadness, anger, etc.), appropriately (without yelling, without emotional blackmail, without withdrawal of affection, etc.), "leaving aside" their emotions and focusing on their parental role. One way to achieve this would be for parents to express that they are able to remain calm and not feel angry when faced with a stressful situation. For example, when faced with bad behaviour by their children, adults may feel angry, but be able to "count to three", and adequately face the situation.

3 = Intermediate level

The parents show some ability to overcome their emotions. Namely, they initially focus on their own emotions, but eventually employ strategies which allow them to focus on their parenting. In this regard, they are capable of performing their parental role, although the affectation of their negative emotions limits their effectiveness in their task as a parent.

One possibility would be that, when faced with conflictive situations, the parents present angry or angry reactions, initially losing control of the situation. For example, an adult expresses that they need to "go to another room" or "take a walk to relax and be able to deal with the situation", or that they "do some yelling", but manage to calm down in the end.

Another indicator would be an adult who, as a result of deep sadness, or very pressing situations, has difficulties focusing on their role as a parent. For example, an adult explains that it is hard for them to get up in the morning because they feel depressed, and that their partner or child has to help them get going each day, finally managing to fulfil their responsibilities, although once in a while it fails.

1 = Nothing

The parents do not know how to adequately express their emotions, expressing them in a clearly inadequate way, or not being able to express them at all. Similarly, they are unable to overcome their emotions, having a clearly negative impact on the exercise of their parenting.

A clear indication of this situation would be a parental figure with a deep depression who does not face their tasks as a parent.

Another possibility would be a parent who talks about their difficulty in staying calm in conflictive situations. For example, they explain that, when they get angry, they are not able to "escape the cycle", and says things which they later regret, or they tend to explode very easily.

ESR.3. The parents can put themselves in the shoes of their children**5 = Totally**

The parents try to understand the behaviour and emotions of their children, demonstrating the ability to adopt perspectives. Faced with a real situation in which their child misbehaved (question 8 of the interview), adults seek explanations for their children's behaviour, and demonstrate a strong ability to put themselves in their situation. For example, adults ask their child why they acted like that, how they feel? ... trying to understand the causes of their behaviour and their emotional state ("I try to put myself in their situation, to think about how they could be feeling").

**3 =
Intermediate
level**

The parents try to understand the behaviour and emotions of their children, and to put themselves in their situation, although they are not always successful. For example, they may or may not do so, depending on the situation ("it depends on what you did"). Or it may depend on the adult's own emotional state. For example, the parents explain that, in general, they are able to put themselves in the place of their children, except when they themselves get angry, in which case, "their judgment is clouded".

1 = Nothing

The parents do not usually reflect or stop to think about why their children act the way they do, or how they feel. The actions of adults in a conflictive situation do not take into account the reasons which explain the behaviour of children and adolescents. They can use expressions, such as, "if I don't even understand myself how I can understand him/her", or, "sometimes he/she gets mad, no one understands him/her".

The parents tend to always look at the negative side of the behaviour of their children, thinking that their negative behaviour has the clear purpose of annoying them.

ESR.4. The parents can adequately accept the emotions of their children**5 = Totally**

The parents accept all the emotions of their children in an appropriate way. Examples of this would be that their children can express negative emotions, without receiving punishment, or that they respect their children if they ask for "time to be alone". In a divorce case, an example of this competence would be for the adult to accept their child's feelings of love for the other parent.

**3 =
Intermediate
level**

The parents have certain difficulties in adequately accepting the emotions of their children. This difficulty may come from accepting some emotions, but not others. They may also show moderately adequate acceptance of their children's emotions. For example, if the child asks for some time to be alone, the parent's initial reaction does not indicate acceptance ("oh, what nonsense, if you only knew the problems I have"), although they finally demonstrate understanding and acceptance of emotions.

1 = Nothing

The parents do not accept, or tolerate, the emotional expressions of their children. An example would be that, when faced with a child who does not stop crying, their parent indicates that the situation is beyond them, or an expression of the type, "when my child is in a bad mood I tell them to stop the nonsense".

9. Adequate perception of the parental role (APP)

It refers to the extent to which the parents show an adjusted perception of their role as parents. That is, it evaluates the existence of a realistic perception of their own capacities for the upbringing of their children, showing confidence in such capacities.

Moreover, it evaluates the extent to which the parents feel satisfied with the duty of being parents and to what degree they see that this duty plays a central role in the definition of their identity. The adults know the difficulties associated with the exercise of parenting.

APP.1. The adults have a realistic perception of their competencies as parents

5 = Totally

The parents show a good degree of self-awareness of their own strengths and weaknesses as parents. Thus, in response to question 9 of the interview ("what would you say are your best and worst qualities?"), they are able to name two of their own qualities, as well as two weaknesses in their task as parents. For example, they indicate that they are "patient" and "take an interest in the things that worry their children", although they acknowledge that "they do things for their children more than they should" and "lose their temper easily".

The description of their own strengths and weaknesses, as parents, reflects a realistic view of their competencies.

3 = Intermediate level

The parents reflect on their strengths and weaknesses as parents, although some of the following issues are observed in their discourse: a moderate degree of self-awareness of their own competencies and weaknesses as parents, and/or a moderately realistic view of them.

A moderate degree of self-awareness of their own strengths and weaknesses as parents would come from the fact that, in response to question 9 of the interview, parents are capable of naming two qualities of themselves but not two weaknesses, or they are only capable of citing one quality and one weakness.

In a complementary way, a moderately realistic view of their competencies would come from demonstrating a very optimistic view of their own competencies. In other words, this moderate self-awareness can also be given by a description that is more ideal than real.

1 = Nothing

The parents do not spend time reflecting on their strengths and weaknesses as parents.

Proof of this would be that they were not able to name more than one strength or weakness related to parenting in response to question 9 of the interview.



APP.2. The adults are confident about their parental capacities

5 = Totally

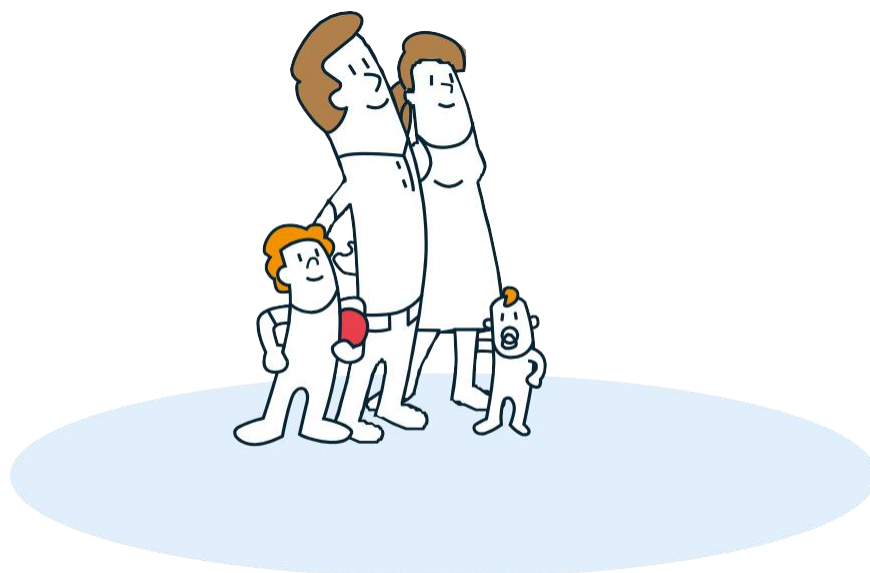
When viewing the images proposed in question 9, or when asked "do you feel capable of facing any situation that has to do with raising your children?", the adults show confidence in their parental competencies. It is not that parents consider themselves prepared to overcome any situation, because it would reflect an unrealistic vision of their competencies, but they do state that, in general terms, they feel prepared as parents. Examples of this competence would be expressions, such as the following: "I do not consider myself the best parent in the world, but in general I think I am a good parent", "I don't know if I have everything that it takes to solve any situation, but I am confident that I would find a way to do it", or "I would not say that I am a superhero, but I do think that I appear like a parent who sees themselves capable of facing any problem".

**3 =
Intermediate
level**

When viewing the images proposed in question 9, or when asked, "do you feel capable of facing any situation that has to do with raising your children?", the adults show a moderate confidence in their parental competencies. This moderate degree of trust may be determined by the fact that they feel competent in some matters, but not in others. It is also possible that adults speak of this circumstance, indicating, for example, "I think I am a normal parent, neither the best parent, nor the worst parent in the world".

1 = Nothing

When viewing the images proposed in question 9, or when asked, "do you feel capable of facing any situation that has to do with raising your children?", the adults show a great lack of confidence in their parenting abilities. Proof of this would be expressions, such as the following: "I am not very good at this with children", or "I have thrown in the towel". Those parents who clearly feel identified with the adults in images B or C, would score in this category, that is, with adults who do not feel prepared to raise their children (image B), or that they feel more comfortable performing other roles, compared to exercising parenting (image C).



APP.3. The parents are aware of the problems and difficulties involved in the exercise of parenting

5 = Totally

In their talks, the adults present a realistic view of the difficulties associated with the exercise of parenting acknowledging such difficulties. Proof of this is that, when asked, "what would you say are the most important difficulties for you?", they are able to identify at least three areas of difficulty. For example, they can indicate "stay calm in conflict situations", "help my children with school issues" and "my partner and I agree".

**3 =
Intermediate
level**

In their talks, the adults show a moderately realistic vision of the difficulties associated with the exercise of parenting. An example of this level would be that the adults express, "I am aware of the problems and difficulties that being a parent entails" but they are only able to identify two areas of difficulty.

1 = Nothing

The adults do not show that they have become aware of the problems and difficulties associated with the exercise of parenting. Proof of this is that, when asked, "what would you say are the most important difficulties for you?", they are unable to identify any area. Examples of expressions associated with this level would be "I handle these things perfectly", or, "Now I can't think of any particularly difficult aspect, I have never stopped to think about this".

APP.4. The adults show interest in those matters related to the exercise of parenting

5 = Totally

The exercise of parenting occupies an important place in the lives of the parents, they are interested in how to "do it right", in relation to the care and education of their children, and they carry out actions to achieve it.

An example of this competence would be that they show interest in improving as a parent, and that they have done something about it. For example, the parents spend time thinking about how to support their child in their age-appropriate achievements, and have read about it, or have enrolled in a parenting school.

**3 =
Intermediate
level**

The parents show some concern for "doing it well", as parents, or only in some issues. It is also possible that they are interested in "doing it well" but that they do not carry out effective actions to achieve it. For example, they show interest in improving as a parent but, when help is offered, they find it difficult to collaborate.

This level would also be scored when the exercise of parenting is so absorbing that it prevents the parents from developing in other aspects of their lives.

1 = Nothing

The parents do not show interest in "doing it well", in relation to the care and education of their children, nor do they carry out behaviours aimed at producing changes to introduce improvements in their parental role. This level would also be scored if the adults make general and diffuse reflections, such as, "I want to improve but I can't".

APP.5. The parents enjoy their role as parents

5 = Totally

During the course of the interview, the parents show signs of enjoying the upbringing and education of their children. When asked "would you say that being a parent is something that fills you with satisfaction?" the answer is clearly positive, and this information is consistent with that offered in the rest of the interview.

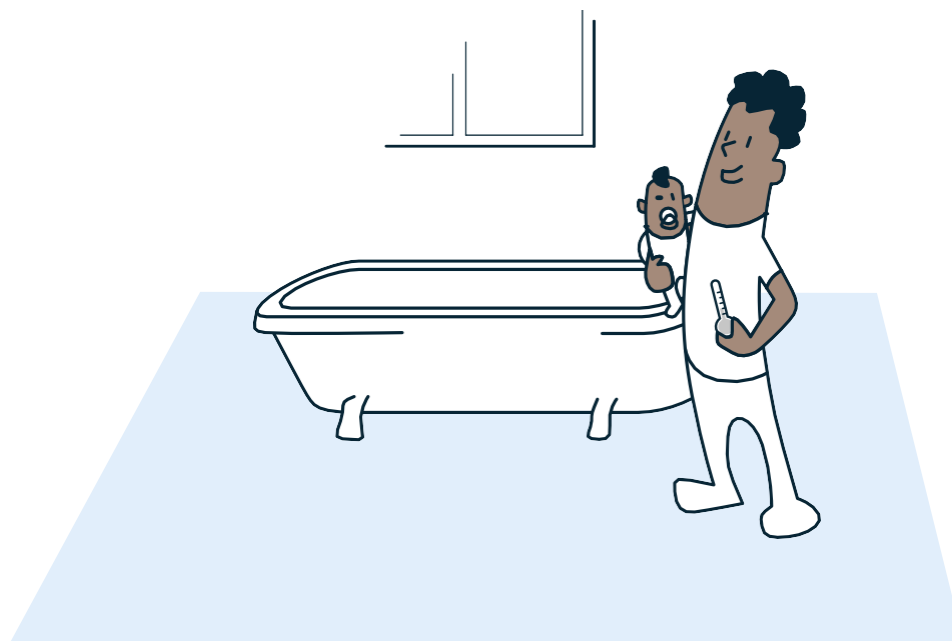
**3 =
Intermediate
level**

The parents show signs of moderate satisfaction in the exercise of their parental role. For example, when asked, "would you say that being a parent is something that fills you with satisfaction?", they answer, "I like being a parent, although I am not totally satisfied". Or they indicate that they enjoy being a parent, but that they feel more satisfied performing other roles, with phrases, such as the following: "I like to play with my son, but I enjoy going out with my friends more".

Given the social desirability associated with this indicator, it is important to be alert throughout the course of the interview to the responses of the parents, related to this content. It is possible that when asked, "would you say that being a parent is something that fills you with satisfaction?", the answer is positive, but that at other moments of the interview, the adults have expressed feeling dissatisfied with this task. In this case, the most specific information should prevail, even if it reflects a more negative view.

1 = Nothing

The parents feel dissatisfied with the upbringing and education of their children. This level can be given because, during the interview, the adults explicitly indicate that they feel dissatisfied as parents. It can also be observed if, when faced with the images in question 9, the adults clearly indicate their preference in performing other roles, in a complementary way, to an expression of dissatisfaction (for example, "I am going to be a parent I just don't like it and I prefer to take care of other household chores rather than the children").



10. Stress coping strategies (SCS)

It refers to the deployment of adaptive actions by the parents during the process of coping stressful situations related to parenting. This process implies becoming aware of the situation and managing it

through cognitive, emotional and behavioural strategies that help the parents to face the stressful situation effectively and satisfactorily.

SCS.1. The parents are capable of facing different tasks and challenges simultaneously

5 = Totally

The adults demonstrate the ability to face the tasks and challenges, involved in exercising parenting, simultaneously with other responsibilities (work, domestic, etc.). This level can be determined because they verbally express that they feel capable of "carrying forward" different tasks (for example, "I consider myself a decisive person, capable of carrying out different things at the same time"), or because, in response to the different questions that are raised in section 10, demonstrate this coping capacity.

Given that this competence is particularly sensitive to social desirability, it is necessary to be alert to the discourse of the parents during the interview, and use the most specific information provided to assess this indicator, prioritising the said information over general expressions.

3 = Intermediate level

The adults demonstrate a moderate capacity to face the tasks and challenges which the exercise of parenting, simultaneously with other responsibilities, implies. It would be indicative of this level if this simultaneous coping ability occurred only in some circumstances. For example, a parent says that they take care of the children and the housework well, but that they "feel down" if they have a stressful situation at work.

1 = Nothing

The adults are not capable of facing the tasks and challenges involved in exercising parenting, simultaneously with other responsibilities. In their interview, the parents explicitly express a feeling of being overwhelmed (for example, "I can't handle everything"), or, in response to the different questions posed in section 10, this lack of coping strategy is clear.



SCS.2. The adults are capable of recognising stressful situations in the exercise of parenting

5 = Totally

The adults recognise the situations which generate stress in the exercise of parenting. This competence is observed if, in question 10, the adults are able to identify a situation that caused them stress, and/or, overwhelmed them in relation to the upbringing and education of their children.

In addition, to score at this level, parents must verbalise some key/s which allow them to identify such stressful situations, such as feeling restless, being more irritable than usual, or "being more clumsy" or "absent". For example, "I realise when a situation overwhelms me, I start to get nervous", or, "After all day dealing with the children, I realise that I am running around like a chicken without a head, so I don't even know what I'm doing".

**3 =
Intermediate
level**

An intermediate level in this skill would be determined because adults recognise situations which generate stress in the exercise of parenting, but they are not capable of verbalising keys that allow them to identify such stressful situations. For example, in response to question 10, they explain "The schoolwork overwhelms me", or, "When we go shopping with the children I realise that the situation is beyond me, it's distressing".

1 = Nothing

The adults are not able to identify any situation that has generated stress, and/or, overwhelmed them in relation to the exercise of parenting, neither in response to question 10, nor during the course of the interview.



SCS.3. The parents use effective strategies to face stressful situations

5 = Totally

The parents use effective strategies to deal with stressful situations, related to the exercise of parenting. It is not a matter of using a specific strategy, but rather, that the strategy used is adequate to deal with the situation described. To score at this level, adults must verbalise at least three situations that they have resolved effectively, in response to the question "And, in those situations, what do you do, what strategies work for you? Could you give me some examples?"

Some coping strategies which parents can verbalise are: the use of humour, emotional relief, seeking support, withdrawing from the stressful situation, cognitively re-elaborating the situation, etc. There are no effective or ineffective strategies in absolute terms, but their effectiveness depends on the extent to which they are useful, for the specific stressful situation in which they are used.

Examples of this competence would be a parent who, faced with a conflict, and before losing their temper, leaves the room for a few minutes to calm down, and then returns to face the situation, or a parent who finds that the children made a mess in the room and confronts the situation, humorously.

3 = Intermediate level

An intermediate level in this skill would be determined by a moderate use of coping strategies, or by their moderate effectiveness.

Regarding moderate use, this level would imply that, in response to the question, "And, in those situations, what do you do, what strategies work for you? Could you give me some examples?", the adults are not able to identify more than two situations in which they have made effective use of coping strategies.

The moderate effectiveness of the strategies used would be determined by a relative fit, between the strategy used, and the stressful situation. For example, a parent who walks out, in the face of a conflict, and does not face the situation when they return, is using a useful strategy to remain calm (avoidance, withdrawing from the stressful situation), but the said strategy is insufficient to resolve the conflict if it is not subsequently addressed.

1 = Nothing

The parents do not use effective strategies to deal with stressful situations, related to the exercise of parenting. This level would be determined because the adults are not able to identify any stressful situation that they have resolved effectively, either because they are not able to describe any situation, or because the strategy used in the described situation is clearly inadequate. For example, a parent who finds the children's room in a mess, and locks themselves in their own room, to cry inconsolably (emotional relief). It is also possible that the parents indicate that, in the face of an overwhelming and/or stressful situation, they become blocked and have a hard time getting over it.

11. Social support (SOS)

It evaluates the support received by the parents regarding the upbringing of their children. Therefore, this dimension includes the capacity to search and access different, significant and useful sources of support in the upbringing of their children, as well as the reciprocity in the received support.

Similarly, it reflects the extent to which the received support allows covering the existing support needs in an effective manner. The search for support implies motivation for the improvement of the parental competencies.

SOS.1. The parents have different people and resources to cover their needs as parents

5 = Totally

When they need it, the parents seek the necessary resources and support for the care and education of their children. As a consequence, the parents have several people to ask for help, or have access to support resources, for issues related to the care and education of their children. The support they receive is useful and sufficient to meet their needs, as parents, and they feel satisfied with this help.

Thus, they mention several different people and/or resources, to whom they can and/or usually go to (three or more people). In addition, the people and/or resources they turn to, allow them to cover different support needs: material (for example, taking care of the child if they become ill); informative (for example, asking questions regarding the education of the children); and, emotional (for example, venting about your concerns as a parent).

In the interview, the parents express satisfaction with the help received.

3 = Intermediate level

The parents have one or two people, or a single resource, to ask for help with issues related to the care and education of their children (for example, a grandparent or a hired person).

Thus, they have some support in case of need (for example, if the child gets sick they can leave them with a grandparent), but in the interview it is perceived that they feel "pressed" to ask for this help, which it is difficult for them to accept, that the support figure is overloaded, or that they have help for some issues, but not for others (for example, they have someone to leave the child with if they get sick, but do not have anyone to talk to about their concerns as a parent).

In the interview with the parents, it is observed that the help received is useful, but not enough to cover all their needs, or they are not fully satisfied with the said help.

1 = Nothing

The parents do not have help or resources in their immediate context, in most matters related to the care and education of their children.

Thus, in case of need, it is the parents themselves who must take charge of the situation (for example, if the child becomes ill, one of the parents must be absent from work to take care of them), or they do not have other people with whom they can share doubts or concerns, related to the exercise of parenting (for example, the parents have each other to talk about these issues, but they do not have any friends or relatives with whom to share them).

In the interview it is observed that the parents feel dissatisfied, with respect to this situation, and explain that they would need more help. It is also possible that they do not have the necessary help, or resources, because they do not actively search for these resources, or because they do not feel comfortable accepting the help of other people and report preferring to, "do things by themselves, without anyone helping them".

SOS.2. The support network of the parents consists of significant people of their nearby environment

5 = Totally

The support network of the parents for issues, related to the care and education of their children, is made up of significant people for them, such as relatives, friends and very close neighbours.

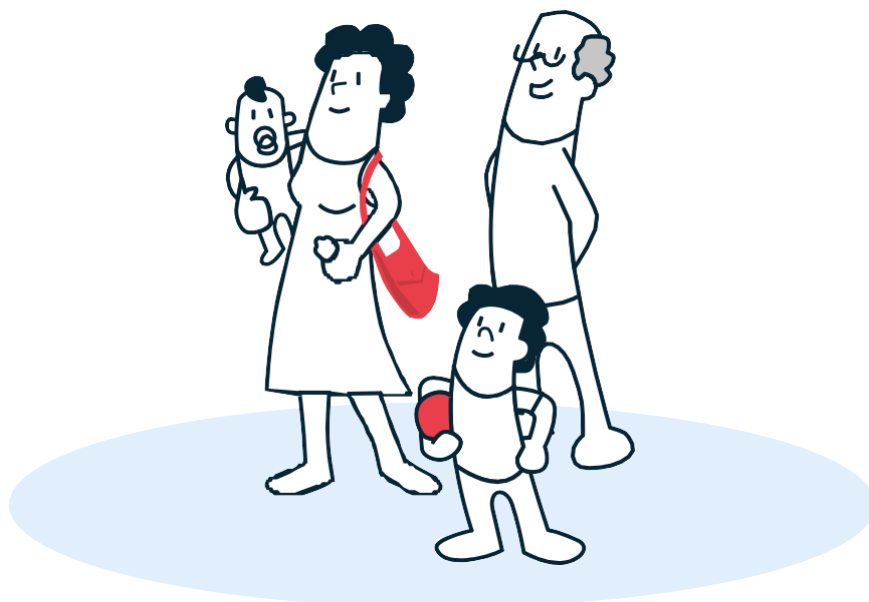
3 = Intermediate level

The parents have some significant people for them, in case they need help (such as, close relatives and friends). However, in the interview, it is appreciated that they must also go to other sources of support for material, informational or emotional issues. For example, they convey that they can ask a grandparent to take care of their child, but that the only person with whom they can vent about their children's education is a neighbour, with whom they do not have much confidence. Or they have a sibling to ask for advice but need help from social services for their family to "get by".

1 = Nothing

The parents do not have people who are significant to them (such as relatives, friends or very close neighbours), if they need help in matters related to the exercise of parenting. For example, they convey that the only person they have as a source of support is the social services professional, the parish priest, or the school/institute counsellor. Or they report that they cannot count on anyone to help and/or support them, in relation to the care and education of their children.

It is also possible that they have a support figure from their immediate environment, but that person is not appropriate for this role. For example, one of the parents conveys that the only person with whom they can vent their concerns about their adolescent son/daughter is with their younger sibling, to whom they convey their problems and concerns.



SOS.3. When required, the parents can receive support from formal support sources**5 = Totally**

When necessary, the parents turn to sources of formal support for issues related to the care and education of their children. Some examples would be asking the school teacher for advice on academic matters, requesting an appointment with a speech therapist if language-related problems are suspected, seeking advice from a social services psychologist to address a family problem, etc.

**3 =
Intermediate
level**

The parents turn to formal support sources only for some issues, related to the care and education of their children, but not for others in which they could be useful. For example, they request information from the school teacher about their child's school performance in studies, but they have never considered asking for a referral to an Ophthalmology Specialist, despite the fact that the child complains that his head hurts when he reads for long periods of time.

It is also possible that parents turn to sources of formal support more than necessary, thus demonstrating a clear dependency on these sources of support and their inappropriate use. For example, they frequently ask for advice or vent to the social services or Red Cross professional, in such a way that they seem to be trying to establish a "friendship" relationship, rather than a "professional-user" relationship.

1 = Nothing

The parents have not gone, and do not plan to go, to any formal support source for issues related to the care and education of their children. They have come to the Red Cross by being "forced", or "pressured", by others. They have never detected a need or, if they have detected one, they have not planned or have not mustered the necessary energy to ask for this type of support.

They may not be aware of the resources available to them within their community. For example, they say that there is no resource that can help them, or that they would not know who to turn to in case of need.

Not having a support network of any kind would also be scored at this level.

SOS.4. The parents are sources of support for other significant people of their nearby environment**5 = Totally**

Other significant people (such as relatives, friends or very close neighbours) count on the parents to ask them for help in matters related to the education of their children, with some frequency. For example, a sibling, an in-law or friend asks one of the parents for advice, or asks for help in caring for their child.

This help is not perceived by the parents as a source of stress or overload, but rather as a source of satisfaction.

**3 =
Intermediate
level**

Other significant people (such as relatives, friends or very close neighbours) count on the parents to ask them for help in matters related to the education of their children, and this help is perceived as overload. For example, one of the parents reports that their brother constantly asks them for help to take care of their child, and this is experienced in a negative way.

It is also possible that the parents are a very sporadic source of support from other people. For example, one of the parents reports that a neighbour once asked them for advice about a school in which to enrol their child.

1 = Nothing

Parents are not sources of support for other significant people in aspects related to the education of their children.

12. Household management (HM)

It evaluates the skills of the parents to efficiently manage the tasks related to household organisation.

Specifically, it assesses the safety, management, cleaning and order in the household.

HM.1. The household is safe for the children and adolescents and a good state of habitability is maintained

5 = Totally	<p>The parents keep the house habitable and in optimum safety conditions. The house is perceived as a "home", with furniture and furnishings in good condition.</p> <p>The parents have established procedures to guarantee the safety of their children and adolescents at home, according to their age. For example, medicines and toxic products are protected under lock and key.</p> <p>The parents take care of fixing damage or breakdowns in the home, quickly.</p>
3 = Intermediate level	<p>There are no obvious dangerous items in the home, although the parents have not provided specific age-appropriate safety procedures for their children.</p> <p>Not all the necessary repairs are attended to immediately, although those which affect the safety of children and adolescents are. For example, curtains are missing or a light bulb is missing, a towel rack is broken, or a wardrobe does not close properly.</p>
1 = Nothing	<p>The parents do not care about keeping the house habitable, and there are obvious dangerous elements. For example, there are broken glass, broken plugs, missing windows or doors, or there are other elements which make the house uninhabitable, such as furniture in poor condition. Children and adolescents have suffered some harm/injury as a result, or the danger of their suffering harm/injury is imminent.</p>

HM.2. The parents keep the household clean and in good hygiene conditions

5 = Totally	<p>The parents keep the house clean and in good hygienic conditions. Neutral or pleasant odours are perceived in the house. The cleanliness and hygiene conditions of the house make it an appropriate place for children to play in.</p> <p>The parents state that they spend time, daily, cleaning the home (such as scrubbing the kitchen, going over the bathroom, sweeping the floor, etc.).</p>
3 = Intermediate level	<p>The house presents moderate hygiene conditions, although there are signs of a lack of cleanliness. For example, dust is observed on the furniture, there are dirty dishes accumulated from one day to the next, or dirt stains in the bathroom. The lack of cleanliness, however, does not pose a threat to the health of the children and adolescents.</p> <p>The parents state that they dedicate some time each week to cleaning the home.</p>
1 = Nothing	<p>The lack of hygiene is so high that the children and adolescents have become ill, or could become ill, as a result. For example, there are piles of dirty clothes, accumulated garbage or bugs in the house. There are putrid odours or visible food debris.</p> <p>The parents do not spend time cleaning the home, or only do it sporadically.</p>

HM.3. The household is in order, ensuring its comfortability

5 = Totally

The parents keep the house tidy so that it is comfortable to live in. There are no disordered or piled up items around the house, beyond some daily use objects (such as a coat that has not yet been hung up, or the school bag pending to be put away).

There are differentiated spaces to carry out different activities, and a place to store everything, so it is easy to find everything and coexistence is facilitated.

**3 =
Intermediate
level**

The parents make sure that the house is tidy enough to live in, although there is some clutter which makes it less pleasant. For example, there are constantly messy clothes or toys, or objects accumulated that do not have an assigned space, so it is not always easy to find them.

1 = Nothing

The parents do not care to keep the house tidy, in such a way that it is uncomfortable to live in. The degree of disorder in the house affects the development of daily activities, which are also hindered because there are no differentiated spaces for different activities. For example, it is difficult to find clean clothes to wear, or a specific toy, there are objects which hinder passage or that pile up in spaces which prevent their use (such as the table, bed, kitchen counter, etc.).





5

GUIDELINES FOR THE APPLICATION AND SCORING OF THE ECP-12

The Interview for the assessment of Parental Competencies (ECP-12) is proposed as an assessment tool which allows rigorous and systematic measurement of the competencies required for a positive and responsible exercise of parenting. To make proper use of this assessment tool, it is essential both to know the tool well, and to be faithful to the general guidelines for its application and scoring.

As previously mentioned, the ECP-12 is an assessment tool which allows the assessment of 12 parental competencies in a semi-structured interview format. The interview script has been developed in such a way that it can constitute a

pleasant conversation, in which the interviewees do not feel judged. For this, it is important that the interview takes place in a pleasant context and climate. The approximate duration for the application of the ECP-12 is about 40 minutes. For these conditions to be met, the application of this interview requires that the **professional** has certain communication skills, specialised training in positive parenting, and prior training in the use of the tool. In this regard, and until familiar with the tool, it is recommended recording the interview on video or audio (with the prior consent of the person interviewed), so that the professional can pay full attention to the interviewee, and can carry out the interview in less time, by not having to take notes.

In addition, the recording of the said interview would also facilitate the process of scoring the tool at a later time.

Regarding the **interviewee**, the interview must be carried out with the main carer. Other relevant parental figures may participate, although this is not essential. Family members are understood to be all the people who live in the home. The parental figures are the people who are responsible, and who participate, to some extent, in the upbringing and education of children and adolescents, regardless of the link which unites them (mother, father, grandmother, legal guardian, etc.), and their living situation. Among the parental figures, the main carer is the person who assumes the greatest responsibility for educational tasks.

Although the ECP-12 assesses the parental competencies of a family globally, some competencies are individual in nature, and can vary greatly from one parental figure to another. In case of discrepancy, the interviewer should prioritise the information referred to and/or provided by the main carer.

In the case of families with several children, and for some indicators, the interview will focus on the child who shows the greatest need for intervention and, as a general rule, who is aged between 3 and 12 years.

During the course of the interview, or later in the case of having recorded it, the interviewer will assess each of the indicators which make up each competence in the **Record Sheet** (see Appendix 1). To do this, based on the information that is obtained in the interview, the interviewer can write down the data they consider most relevant and appropriate for the said assessment. To make it easier to fill in, the Record Sheet contains a description of the indicator which can be assessed, with the answer to that question, together with each interview question, as well as a space provided for annotations and/or the score for that indicator. These indicators can be assessed, out of order, depending on the interviewee's discourse and the observations made by the professional.



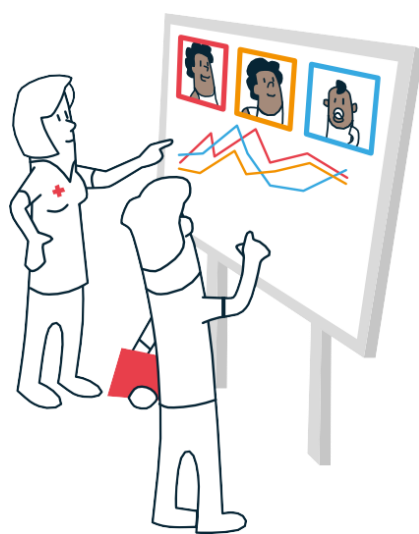
The quantitative assessment of each of the 53 indicators which make up the ECP-12, based on the information provided by the interviewee, may present some difficulties. Therefore, the information obtained through the interview can be complemented with information obtained by other means (observation, information provided by other professionals, etc.), to assess some of the indicators. In any event, the interviewer must ensure that they have all the necessary information to be able to score all the indicators assessed, before carrying out the assessment. This assessment is carried out according to a scale which ranges from 1 (total absence) to 5 (totally present) and, for this, in the Description of the ECP-12 indicators, the extreme (1 and 5), and intermediate (3) values of each indicator, are defined and specified. It may happen that, during the scoring, discrepancies are found between the information obtained through observation, and that provided verbally by the interviewee in the interview, in which case, the professional will prioritise observation for the assessment of the items.

The ECP-12 scoring process begins with the assessment of each indicator on the Record Sheet, and is completed by filling out the **Scoring Template** (see Appendix 2). This includes the information on the scores obtained by the family in each of the competencies assessed, as well as in the total of the tool. To complete this Template, first the score given to each indicator will be recorded, and then the scores of all the indicators, associated with each competence, are added. This allows a sum score by competence (for example, SUM SS) to be obtained which will be transferred to the table of Total Scores by competencies. This sum score must be divided by the total number of indicators completed in the interview, to obtain the total weighted score for each competence. Finally, the global score of the ECP-12 is the result of the sum of the weighted totals of all the competencies, divided by the total number of competencies assessed. In the case of Co-parenting (CO), it is important to take into account the parental configuration of the family, before assessing this competence. For single-parent families, in which only one figure is in charge of

care and upbringing, and the child has no relationship with another parental figure, Co-parenting should not be assessed, and the calculation of the total weighted score of the tool would be based on 11 competencies. In the other parental configurations, CO would be assessed, such as in pairs of parents, couples with a non-parent spouse, parent and grandparent, other relatives in charge of the children or who participate with the parents in the upbringing, intimates, among others. CO would also be assessed in situations of non-cohabitation of the parental couple, such as in divorces, involuntary separations, shared custody, among others.

The **total scores** obtained, both at the level of competencies and globally, can be directly interpreted, taking into account the range from 1 (total absence) to 5 (total presence). In this way, the higher the score obtained in a competence, or in the ECP-12 in general, the greater mastery of the competencies shown by the person assessed, understanding the scores equal to or greater than 4 points, in each of the competencies, as adequate for a positive and responsible exercise of parenting. Additionally, in those cases where the ECP-12 is used to assess the impact of an intervention, the comparisons of the scores, at the beginning, and at the end of the intervention, will make it possible to verify the intra-individual change of a person in each of the parental competencies assessed.

Appendix 4 offers a **scale** to help professionals interpret the scores obtained from a sample of 593 parental figures who use various family preservation services in Spain. A general assessment table is offered, and another differentiated, according to the age of the child or adolescent that has been taken into account, when answering the ECP-12. In both tables, both for the overall score of parental competencies, and for each of the dimensions, the percentiles and the main descriptive statistics (mean scores, medians, standard deviations, minimum and maximum values) are offered, allowing the scores obtained to be placed in the ECP-12, in comparison with other parental figures who are users of family preservation services.



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RECORD SHEET

1. How does a day in the life of your family look like?

What do your children do from the time they get up, until they go to bed?

- 1.1. What time do they usually get up? What do you usually have for breakfast? How do they go to school?
- 1.2. Where, and with whom, do they eat lunch?
- 1.3. What do they do in the afternoons? Do they go to any extracurricular activities? Do they practice any sport?
- 1.4. Do they shower every day? At what time? What time do they have dinner and with whom? What time do they go to bed?
- 1.5. When are you with them? Do you sit down to play a lot with your children? What do you play with them? Do you often read stories with them? Do you like them to interact with other children?
- 1.6. What do they like to play? What kind of toys do they have? Do they have bicycles or scooters? Puzzles or stories? Paintings or crafts? Any musical instrument?
- 1.7. What things do you take into account when buying toys? How do you decide which activities to sign them up for?

SS.1. The parents organise the daily living of their children and adolescents with **routines and healthy habits**, related to food, hygiene, physical activity and sleep

SS.2. The children and adolescents participate in **regulated and stable** leisure or stimulation activities

SS.3. The children and adolescents participate in stimulating activities and routines **promoted by the parents**

SS.4. The parents offer their children activities that facilitate their **psychomotor development** (physical activities, sports, etc.)

SS.5. The parents promote activities that facilitate the **cognitive-linguistic development** of their children (reading stories, educational games, etc.)

SS.6. The parents provide their children with experiences that promote their **socio-emotional development (interactions with peers)**

SS.7. The children and adolescents have access to **varied and stimulating toys and materials**, that fit their age and development level

SS.8. The stimulation experiences provided by the parents **are enriching and fit** the specific characteristics of the children and adolescents

**2. Now I would like you to tell me about the time the whole family spends together.
At what time of day are you all together?**

2.1. Do you all do something together every day? And the weekends?

2.2. What do you like to do together?

2.3. Can you remember any situation, or moment, in which you have all had fun together in the last few days?

FAM.1. All the members of the family participate in group **activities** (dining, watching a film, going for a walk, playing, chatting, etc.)

FAM.2. All the members of the family participate in **playful or leisure activities** (going to the cinema, visiting relatives, going on a trip, etc.)

FAM.3. The **family enjoys** doing things together

3. In the case of your children, which adults participate and are you responsible for their upbringing and education?

[It is important to assess, on the one hand, if the parents or other adults who live in the home, participate in the care of children and adolescents, (indicator CO.1) and, on the other, if the adults who act as parents, whether they live together or not, respect and co-operate in relation to the education of the children (indicators CO.2, CO.3 and CO.4). That is, these indicators could be answered by single-parent or two-parent families. Only in cases where there is just one parental figure, and the children do not live with or have a relationship with another parental figure, these indicators will be recorded as "not applicable"]

3.1. How do you organise taking care of the children?

Who is in charge of each task?

3.2. Who decides things that have to do with the children, and how?

3.3. What do you do when you disagree? Do you discuss these topics a lot?

3.4. How do you see the other as a mother/father/grandmother/grandfather?

3.5. Are you happy with how you organise yourself regarding the children?

CO.1. The adults who coexist in the same home **share the duties of upbringing and education** of their children and adolescents

CO.2. The parents agree in the matters related to the education of their children

CO.3. The parents **respect and support** each other mutually in the exercise of parenting

CO.4. The parents **feel satisfied** with how they cooperatively manage the matters related to the education of their children

**4. Now I would like to know your opinion about the importance of the family.
Do you think that parents can influence what their children are like?**

4.1. In what aspects can they influence the most? And how?

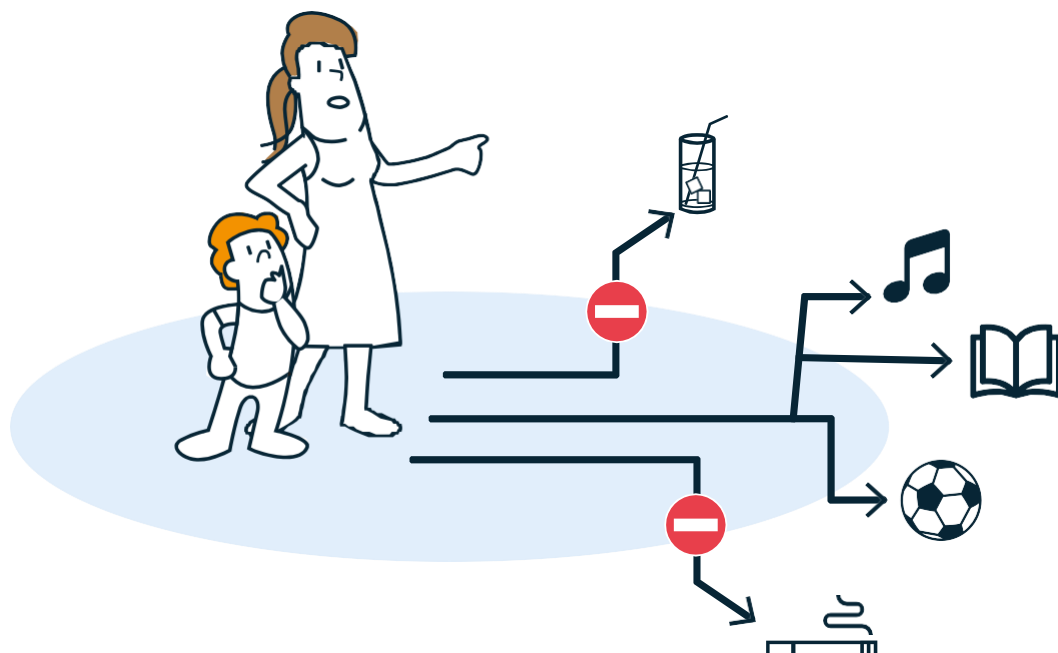
4.2. For example, what can parents do to make a child behave well? And to do well in school? And so that they learn to relate to other children?

4.3. Do you think it is good to make demands of children so that they learn and mature? In what things are you the most demanding? And how do you do it?

ABE.1. The parents believe that **their way of acting** as parents influences the development of their children

ABE.2. The parents consider what happens in the family influences the development of their children at school and in other contexts

ABE.3. The parents believe that it is **good for the development of their** children to give them attainable challenges based on their age and capabilities



5. Now I would like you to tell me a little more about your child. What is your child like?

[In the case of having more than one child, ask them to think about the one the intervention will focus on]

*[*ACA.4 and ACA.5: If the child is present during the interview, observation can be used as support to assess both indicators]*

Tell me the 5 things that best define them.

ACA.1. The adults **recognise the value** of their children

5.1. Would you like your child to be very different from how your child is? What would you like to change?

ACA.2. The parents **accept** their children as they are

5.2. What things does your child like to do? Do you know your child's friends well?

ACA.3. The parents **show interest** for and are involved in their children's world

5.3. How would you describe your relationship with your child?

5.4. What things do you do to show your child that you love them? Does your child like these displays of affection?

5.5. Would you say that there are times when it is difficult for you to be respectful and affectionate with your child? What are they? How often does it happen?

ACA.4. The adults **show affection** toward their children, adjusting to their personal characteristics*

5.6. If someone (a teacher, a neighbour, etc.) calls you to tell you that your child has misbehaved, what do you do? How do you usually react in such cases? Do you get upset, or are you able to talk calmly with your child?

ACA.5. The parents use **dialogue and reasoning** with their children as an educational strategy

5.7. Do you usually talk a lot with your child? At what times of the day? Who usually starts the conversation?

5.8. How do you usually talk to your child? Do you usually talk to them angrily, or do you address your child with affection?

Do you usually listen, and always pay attention to what your child tells you?

ACA.6. The parents **promote communication** in their relationships with their children in a cordial and respectful manner

5.9. Would you say that your child trusts you? For example, if your child has a problem, do they come to you and tell you, so you can help?

ACA.7. The actions of the parents **favour the building of trust between them and their children**

5.10. Think about the last time your child needed something from you (for example, if your child had a problem with friends or asked you for help because your child could not do something on their own). What do you do in those cases? Do you always act the same when your child needs your help?

ACA.8. The adults **are available and respond efficiently** to the needs of their children

6. Next, I would like you to think about your child's school behaviour,
how are they doing at school?

6.1. Regarding homework, does your child need your help? Do you review everything your child does?

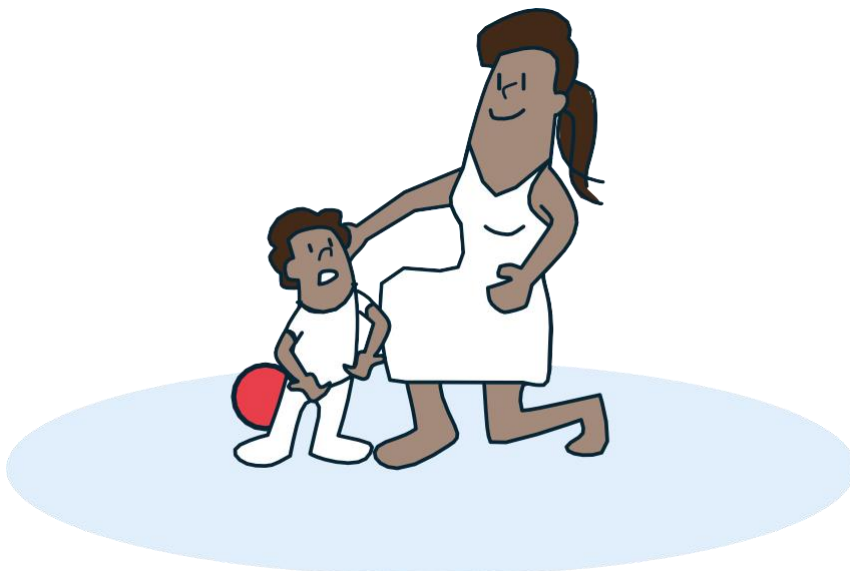
SI.1. The parents **support** their
children in their **school tasks**

SI.2. The adults **supervise the
behaviour** of their children at school

6.2. Do you usually talk to the teachers? And with their classmates?

6.3. Do you go to the school a lot? Why do you usually go?

SI.3. The parents are actively
involved in the school



7. Relationships with children are not always easy. Now I'd like us to talk about the more complicated part, the issue of getting them to behave as we would like.

7.1. Are there rules at home? How do you decide? What happens if the children do not obey them?

7.2. If I had the opportunity to talk to your children, could they tell me what those rules are?

Do you usually let them know in advance what can happen if they break the rules?

RS.1. The adults establish clear **rules and limits** for their children

7.3. When you decide to apply a punishment, are you usually firm in the decision, or do you forgive them easily?

RS.2. The parents **apply** their disciplinary practices in a consistent manner

7.4. How do you control what your child is doing when you cannot keep an eye on them? (For example, if they are older, when do they go out of the house?, if they are small, when do they watch TV?).

RS.3. The parents **supervise what their children do** in their **free time**

7.5. Specifically, what rules do you have for the use of video consoles, tablets and mobiles?

RS.4. The parents supervise the use that their children make of **new technologies**

7.6. Are the rules the same for all your children? Do the rules change with age?

RS.5. The parents apply their rules in a **flexible manner** to adjust to the characteristics of their children and to the circumstances

8. As we have just discussed, all children misbehave at times. Here you see a series of situations in which children have misbehaved. I would like you to think if you identify with some of these situations.

[To answer these indicators, images 1.1 - 1.3 "Images of situations of children misbehaving" will be used. The interviewer can use all the images necessary to collect the information]

8.1. How did you feel in that situation?

8.2. Did you know how to convey how you felt?

8.3. If you had your child in front of you in this situation, what would you say?

8.4. Sometimes it is hard not to lose your temper in these situations, what do you think?

ESR.1. The parents know how to **identify and label** their emotions

8.4. Sometimes it is hard not to lose your temper in these situations, what do you think?

ESR.2. The parents know how to **adequately express and control their emotions**, without negatively affecting the exercise of their parenting

8.5. Why do you think your child behaved like this? Do you usually understand why they misbehave sometimes? How do they feel in those situations? Is it easy for you to put yourself in their situation?

ESR.3. The parents can **put themselves in the shoes of** their children

8.6. When your child tells you to leave them alone, or gets angry and yells at you, tells you that they do not love you and, tries to hit you, even when they are little, what do you do in those cases? How do you react?

ESR.4. The parents can adequately **accept the emotions of their children**

**9. Now I would like you to tell me about yourself as a parent. How do you see yourself?
What would you say are your best and worst qualities?**

[To answer these indicators, images 2.1 - 2.3 will be used]

Look at these images, very different parents are represented.

In the image "2.1." we see a parent who feels capable of anything, who will be able to face any problem, feels like a superhero. In the image "2.2." we see a parent who feels that they are not capable, even seems to have thrown in the towel. In the image "2.3." we see a parent cooking / practicing sports, it seems that they are better at it and enjoy doing other things more than being a parent.

None of these images are real, but which of them would you say you identify with the most?

APP.1. The adults have a
**realistic perception of their
competencies** as parents

9.1. Do you feel capable of facing any situation that has to do with raising your children?

9.2. The truth is, the education and upbringing of children is not an easy task. What would you say are the most important difficulties for you?

APP.2. The adults are
confident about their
parental capacities

APP.3. The parents are aware of the
problems and difficulties involved
in the exercise of parenting

9.3. Do you spend time thinking about these things? Do you often stop to think about how you can improve as a parent?

9.4. What are you trying to do to improve as a parent? Would you sign up for a school for parents?

APP.4. The adults **show interest**
in those matters related to the
exercise of parenting

9.5. Despite the difficulties, would you say being a parent is something that fills you with satisfaction? What gives you happiness? Or, would you rather be doing something else, like the parent in the image C?

APP.5. The parents **enjoy** their role
as parents

10. The truth is that being a parent is not an easy task. Other parents I have spoken with tell me that sometimes they feel they are not going to make it to the end of the day.

Does this also happen to you sometimes, do you feel overwhelmed trying to move everything forward (children, work, home, etc.)?

10.1. Does this feeling of not being able to cope with everything happen to you often, or do you generally consider yourself a decisive person?

SCS.1. The parents are capable of **facing** different tasks and challenges **simultaneously**

10.2. Could you give me an example of a situation that has weighed you down or overwhelmed you, tell me the last time it happened to you?

10.3. Is it easy for you to recognise these situations, when you feel weighed down or overwhelmed?

10.4. How do you know you are overwhelmed? What is it that provides you with the alarm signal?

SCS.2. The adults are capable of **recognising stressful situations** in the exercise of parenting

10.5. In those situations, what do you do? What works for you?
Could you give me some examples?

10.6. Is it very difficult for you to overcome yourself in these situations, when you feel overwhelmed?

SCS.3. The parents use **effective strategies** to face stressful situations

11. When you need help as a parent, what do you do?

11.1. Who do you ask for help? Who do you count on? Where do you go?

11.2. Is there anything these people cannot help you with?

SOS.1. The parents have different **people and resources** to cover their needs as parents

SOS.2. The support network of parents consists of **significant people** of their nearby environment

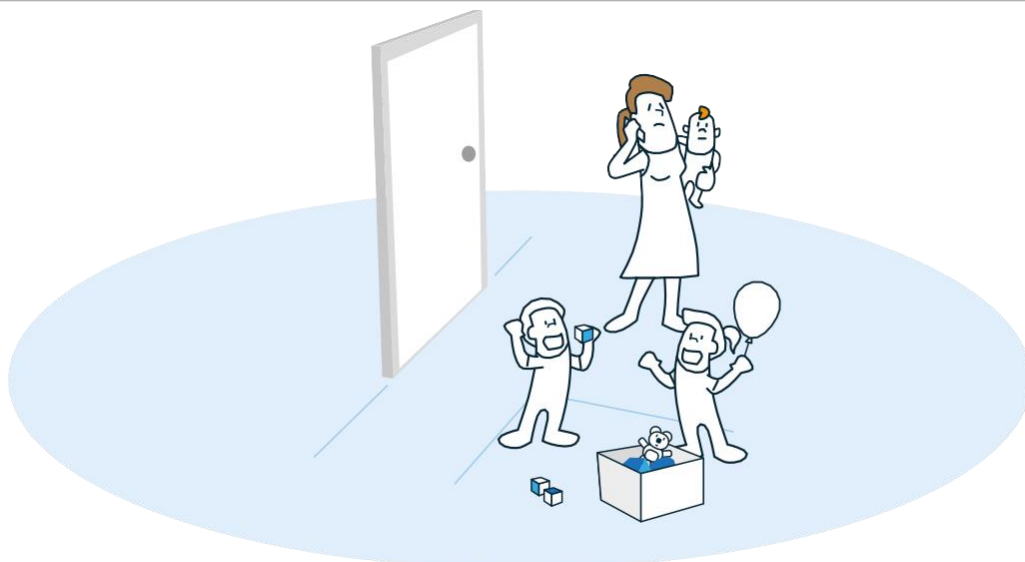
11.3. Have you ever needed to go to a professional for any of these issues?
Would you know who to turn to?

SOS.3. When required, the parents can receive support from **formal support sources**

11.4. Conversely, who comes to you for help on these issues?

11.5. Do you like them to do that?

SOS.4. The parents are **sources of support** for other significant **people** of their nearby environment



**12. To finish, I would like you to tell me a little about your home.
What is your home like? Do you like to raise your children there?**

[If the professional has made a home visit, they will use the information obtained during the visit to assess the items in this block]

12.1. Would you say it is safe? For example, is there a secure place where you can keep dangerous things like medicines or cleaning products?

12.2. When something breaks, does it take a time to fix it?

HM.1. The household is **safe** for the children and adolescents and a good state of habitability is maintained

12.3. Do you spend a lot of time cleaning the house? How often?

HM.2. The parents keep the household **clean** and in good hygiene conditions

12.4. When you have to look for something, is it easy for you to find it because things are usually in their place?

12.5. Do you have different places to do different things? For example, do the children have a place to do their homework?

HM.3. The household is in order, ensuring its comfortability



SCORING TEMPLATE

1. Stimulation and structuring (SS)

SS.1. The parents organise the daily living of the children and adolescents with routines and healthy habits related to food, hygiene, physical activity and sleep

SS.2. The children and adolescents participate in regulated and stable leisure or stimulation activities

SS.3. The children and adolescents participate in stimulating activities and routines promoted by the parents

SS.4. The parents offer their children activities that facilitate their psychomotor development (physical activities, sports, etc.)

SS.5. The parents promote activities that facilitate the cognitive-linguistic development of their children (reading stories, educational games, etc.)

SS.6. The parents provide their children with experiences that promote their socio-emotional development (interactions with peers)

SS.7. The children and adolescents have access to varied and stimulating toys and materials that fit their age and development level

SS.8. The stimulation experiences provided by the parents are enriching and fit the specific characteristics of the children and adolescents

TOTAL SS SCORE

SUM

2. Shared family time (FAM)

FAM.1. All the members of the family participate in group activities (dining, watching a film, going for a walk, playing, chatting, etc.)

FAM.2. All the members of the family participate in playful or leisure activities (going to the cinema, visiting relatives, going on a trip, etc.)

FAM.3. The family enjoys doing things together

TOTAL FAM SCORE

SUM

3 Co-parenting (CO)

CO.1. The adults who coexist in the same home share the duties of upbringing and education of their children and adolescents

CO.2. The parents agree in the matters related to the education of their children

CO.3. The parents respect and support each other mutually in the exercise of parenting

CO.4. The parents feel satisfied with how they cooperatively manage the matters related to the education of their children

TOTAL CO SCORE

SUM

4. Adequate beliefs and expectations about the child's development (ABE)

ABE.1. The parents believe that their way of acting as parents influences the development of their children.

ABE.2. The parents consider what happens in the family influences the development of their children at school and in other contexts

ABE.3. The parents believe that it is good for the development of their children to give them attainable challenges based on their age and capabilities

TOTAL ABE SCORE

SUM

5. Affection, communication and acceptance (ACA)

ACA.1. The adults recognise the value of their children

ACA.2. The parents accept their children as they are

ACA.3. The parents show interest for and are involved in their children's world.

ACA.4. The adults show affection toward their children, adjusting to their personal characteristics

ACA.5. The parents use dialogue and reasoning with their children as an educational strategy

ACA.6. The parents promote communication in their relationships with their children in a cordial and respectful manner

ACA.7. The actions of the parents favour the building of trust between them and their children.

ACA.8. The adults are available and respond efficiently to the needs of their children

TOTAL ACA SCORE

SUM

6. School involvement (SI)

- SI.1. The parents support their children in their school tasks
- SI.2. The adults supervise the behaviour of their children at school
- SI.3. The parents are actively involved in the school

TOTAL SI SCORE

SUM

7. Rules and supervision (RS)

- RS.1. The adults establish clear rules and limits for their children
- RS.2. The parents apply their disciplinary practices in a consistent manner
- RS.3. The parents supervise what their children do in their free time
- RS.4. The parents supervise the use that their children make of new technologies
- RS.5. The parents apply their rules in a flexible manner to adjust to the characteristics of their children and to the circumstances

TOTAL RS SCORE

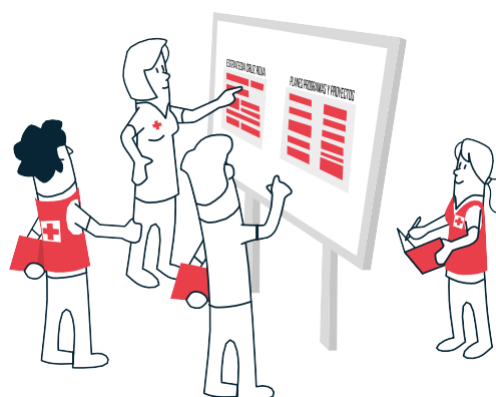
SUM

8. Emotional self-regulation (ESR)

- ESR.1. The parents know how to identify and label their emotions
- ESR.2. The parents know how to adequately express and control their emotions, without negatively affecting the exercise of their parenting
- ESR.3. The parents can put themselves in the shoes of their children
- ESR.4. The parents can adequately accept the emotions of their children

TOTAL ESR SCORE

SUM



9. Adequate perception of the parental role (APP)

APP.1. The adults have a realistic perception of their competences as parents

APP.2. The adults are confident about their parental capacities

APP.3. The parents are aware of the problems and difficulties involved in the exercise of parenting

APP.4. The adults show interest in those matters related to the exercise of parenting

APP.5. The parents enjoy their role as parents

TOTAL APP SCORE

SUM

10. Stress coping strategies (SCS)

SCS.1. The parents are capable of facing different tasks and challenges simultaneously

SCS.2. The adults are capable of recognising stressful situations in the exercise of parenting

SCS.3. The parents use effective strategies to face stressful situations

TOTAL SCS SCORE

SUM

11. Social support (SOS)

SOS.1. The parents have different people and resources to cover their needs as parents

SOS.2. The support network of parents consists of significant people of their nearby environment

SOS.3. When required, the parents can receive support from formal support sources

SOS.4. The parents are sources of support for other significant people of their nearby environment

TOTAL SOS SCORE

SUM

12. Household management (HM)

HM.1. The household is safe for the children and adolescents and a good state of habitability is maintained

HM.2. The parents keep the household clean and in good hygiene conditions

HM.3. The household is in order, ensuring its comfortability

TOTAL HM SCORE

SUM

TOTAL POINTS for COMPETENCIES

	Total score	Nº of Indicators	Weighted score
1. Stimulation and structuring = SUM SS / Nº of indicators completed (up to 8)			
2. Shared family time = SUM FAM / Nº of indicators completed (up to 3)			
3. Co-parenting = SUM CO / Nº of indicators completed (up to 4)			
4. Adequate beliefs and expectations about the child's development = SUM ABE / Nº of indicators completed (up to 3)			
5. Affection, communication and acceptance = SUM ACA / Nº of indicators completed (up to 8)			
6. School involvement = SUM SI / Nº of indicators completed (up to 3)			
7. Rules and supervision = SUM RS / Nº of indicators completed (up to 5)			
8. Emotional self-regulation = SUM ESR / Nº of indicators completed (up to 4)			
9. Adequate perception of the parental role = SUM APP / Nº of indicators completed (up to 5)			
10. Stress coping strategies = SUM SCS / Nº of indicators completed (up to 3)			
11. Social support = SUM SOS / Nº of indicators completed (up to 4)			
12. Household management = SUM HM / Nº of indicators completed (up to 3)			
TOTAL WEIGHTED SUM			

GLOBAL SCORE of the ECP-12

	Total weighted sum	Nº of competencies assessed
(SS+FAM+CO+ABE+ACA+SI+RS+ESR+APP+SCS+SOS+HM) / Nº of competencies assessed		
GLOBAL		



1. Images for the block of questions 8

1.1. Situation A



1.2. Situation B



1.3. Situation C



2. Images for the block of questions 9

2.1. Parent who feels capable of everything



2.2. Parent who feels they are not capable



2.3. Parent performing an activity that they enjoy more than being a parent



To carry out this scale, a sample of **593 parental figures, who are users of family preservation services in Spain**, has been used, which has allowed us to confirm the validation of the scale¹. This is a sample made up mostly of parents (96.30%), mostly women (85.00%), with a mean age of 42.19 years ($SD = 7.83$; range: 18 - 72 years) and 74.40% Spanish nationality. These parental figures were unemployed in 45.50% of the cases and presented a diverse level of studies: 6.50% had not completed primary education, 42.60% had primary studies, 25.00% had secondary studies, and the remaining 25.90 % had university studies. Some 62.60% were of two-parent households. The parental figures reported on their parental competencies in relation to children and adolescents with a mean age of 11.87 years ($SD = 3.27$), and an equitable distribution based on biological sex (56.00% boys).

4.1. Percentiles and descriptive statistics of parental competencies (dimensions and global score) of the total sample ($n = 593$)

Percentiles	SS	FAM	CO	ABE	ACA	SI	RS	ESR	APP	SCS	SOS	HM	Global
1	1.13	1.00	1.00	1.33	1.38	1.00	1.00	1.00	1.40	1.33	1.00	1.67	1.67
10	1.75	1.33	1.00	2.33	2.28	1.67	1.60	1.83	2.22	2.00	1.75	3.00	2.26
20	2.13	2.00	1.50	2.67	2.63	2.33	2.00	2.00	2.60	2.33	2.25	3.33	2.59
30	2.38	2.33	2.00	3.00	2.88	2.67	2.40	2.50	2.80	2.67	2.50	4.00	2.79
40	2.63	2.67	2.50	3.00	3.13	3.00	2.60	2.55	3.00	3.00	2.75	4.00	2.95
50	2.75	3.00	2.75	3.33	3.38	3.00	2.80	3.00	3.40	3.00	3.00	4.00	3.12
60	3.00	3.33	3.00	3.67	3.63	3.33	3.00	3.00	3.60	3.33	3.50	4.33	3.34
70	3.25	3.67	3.50	4.00	3.88	3.67	3.40	3.25	3.80	3.67	3.75	4.67	3.56
80	3.63	4.00	4.00	4.33	4.25	4.33	3.80	3.50	4.00	3.67	4.00	5.00	3.86
90	4.13	4.67	4.25	4.67	4.63	4.67	4.20	4.00	4.40	4.33	4.50	5.00	4.20
99	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	4.68
Statistics													
<i>M</i>	2.87	2.96	2.76	3.39	3.38	3.15	2.92	2.90	3.33	3.14	3.07	4.07	3.19
<i>Mdn</i>	2.75	3.00	2.75	3.33	3.38	3.00	2.80	3.00	3.40	3.00	3.00	4.00	3.12
<i>SD</i>	0.89	1.12	1.16	0.90	0.87	1.07	0.96	0.88	0.82	0.81	1.02	0.83	0.71
Min.	1.00	1.00	1.00	1.00	1.13	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.22
Max.	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	4.95

SS: Stimulation and structuring; FAM: Shared family time; CO: Co-parenting; ABE: Adequate beliefs and expectations; ACA: Affection and communication; SI: School involvement; RS: Rules and supervision; ESR: Emotional self-regulation; APP: Adequate perception of the parental role; SCS: Stress coping strategies; SOS: Social support; HM: Household management; Global: Total Score.

¹ The sample used in the validation process has been collected under the auspices of collaboration agreements and contracts with the Spanish Red Cross, the Ministry of Equality, Social Policies and Conciliation of the Junta de Andalucía, Motril Council and the Government of Cantabria

4.2. Percentiles and descriptions of parental competencies (dimensions and overall score), by age of the child or adolescent, referred to in the ECP-12

Children (under 12 years of age) (*n* = 282)

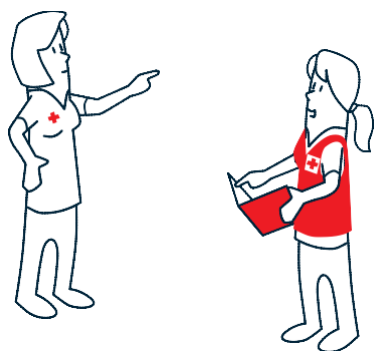
Percentiles	SS	FAM	CO	ABE	ACA	SI	RS	ESR	APP	SCS	SOS	HM	Global
1	1.10	1.00	1.00	1.67	1.38	1.00	1.00	1.00	1.36	1.28	1.00	1.55	1.57
10	2.00	1.67	1.00	2.33	2.38	2.00	1.80	2.00	2.40	2.00	1.75	3.00	2.40
20	2.38	2.33	1.75	2.67	2.78	2.33	2.20	2.25	2.80	2.33	2.25	3.33	2.68
30	2.63	2.67	2.25	3.00	3.13	3.00	2.60	2.50	3.00	2.67	2.50	3.67	2.94
40	2.88	3.00	2.50	3.00	3.38	3.00	2.80	2.80	3.20	3.00	3.00	4.00	3.12
50	3.13	3.33	3.00	3.67	3.75	3.33	3.20	3.00	3.60	3.33	3.25	4.00	3.34
60	3.38	3.67	3.25	4.00	4.00	3.67	3.40	3.50	3.80	3.33	3.50	4.33	3.62
70	3.63	4.00	3.75	4.00	4.25	4.00	3.80	3.53	4.00	3.67	3.75	4.67	3.86
80	4.00	4.33	4.00	4.33	4.50	4.33	4.20	4.00	4.20	4.00	4.00	5.00	4.11
90	4.38	5.00	4.50	5.00	4.75	5.00	4.60	4.43	4.60	4.33	4.75	5.00	4.42
99	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	4.76
Statistics													
<i>M</i>	3.13	3.33	2.88	3.55	3.62	3.42	3.19	3.11	3.51	3.23	3.16	4.05	3.38
<i>Mdn</i>	3.13	3.33	3.00	3.67	3.75	3.33	3.20	3.00	3.60	3.33	3.25	4.00	3.34
<i>SD</i>	0.93	1.12	1.17	0.95	0.88	1.07	1.00	0.93	0.85	0.85	1.06	0.87	0.75
Min.	1.00	1.00	1.00	1.00	1.38	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.55
Max.	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	4.95

SS: Stimulation and structuring; FAM: Shared family time; CO: Co-parenting; ABE: Adequate beliefs and expectations; ACA: Affection and communication; SI: School involvement; RS: Rules and supervision; ESR: Emotional self-regulation; APP: Adequate perception of the parental role; SCS: Stress coping strategies; SOS: Social support; HM: Household management; Global: Total Score.

Adolescence (older than 12 years of age) ($n = 282$)

Percentiles	SS	FAM	CO	ABE	ACA	SI	RS	ESR	APP	SCS	SOS	HM	Global
1	1.13	1.00	1.00	1.33	1.15	1.00	1.00	1.00	1.42	1.33	1.00	2.00	1.67
10	1.63	1.33	1.00	2.00	2.14	1.67	1.60	1.75	2.20	2.00	1.75	3.00	2.20
20	2.00	1.67	1.50	2.33	2.50	2.00	2.00	2.00	2.60	2.33	2.00	3.33	2.50
30	2.25	2.00	2.00	3.00	2.75	2.33	2.20	2.25	2.80	2.67	2.50	4.00	2.66
40	2.50	2.33	2.25	3.00	2.88	2.67	2.40	2.50	3.00	3.00	2.75	4.00	2.84
50	2.63	2.67	2.50	3.00	3.13	3.00	2.60	2.75	3.20	3.00	3.00	4.00	2.97
60	2.75	3.00	3.00	3.33	3.38	3.00	2.80	3.00	3.40	3.33	3.25	4.33	3.13
70	3.00	3.33	3.25	3.67	3.63	3.33	3.00	3.00	3.60	3.33	3.50	4.67	3.36
80	3.15	3.33	3.75	4.00	4.00	3.67	3.20	3.25	4.00	3.67	4.00	5.00	3.56
90	3.63	4.00	4.25	4.33	4.25	4.33	3.80	3.50	4.20	4.00	4.25	5.00	3.91
99	4.63	5.00	5.00	5.00	5.00	5.00	4.98	4.75	4.98	4.96	5.00	5.00	4.50
Statistics													
<i>M</i>	2.64	2.64	2.65	3.24	3.17	2.91	2.67	2.70	3.18	3.05	3.00	4.08	3.02
<i>Mdn</i>	2.63	2.67	2.50	3.00	3.13	3.00	2.60	2.75	3.20	3.00	3.00	4.00	2.97
<i>SD</i>	0.78	1.02	1.14	0.83	0.81	1.00	0.84	0.78	0.76	0.76	0.97	0.79	0.62
Min.	1.00	1.00	1.00	1.00	1.13	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.22
Max.	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	4.67

SS: Stimulation and structuring; FAM: Shared family time; CO: Co-parenting; ABE: Adequate beliefs and expectations; ACA: Affection and communication; SI: School involvement; RS: Rules and supervision; ESR: Emotional self-regulation; APP: Adequate perception of the parental role; SCS: Stress coping strategies; SOS: Social support; HM: Household management; Global: Total Score.



ECP-12

Interview
for the
assessment of
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