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Parenting Skills Assessment Instruments: A Narrative Review of Social Intervention Aspects

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ABSTRACT

The evaluation of parental competencies within child welfare social services is essential in assessing potential instances of neglect concerning children and adolescents. It is also of significant relevance for forensic psychologists operating within family courts, where they provide expert reports concerning custody arrangements in parental disputes. Moreover, these assessments play a pivotal role in the selection processes of adoptive and foster families. This review describes the main instruments that have been published in the Spanish language in the last 20 years. It emphasizes tools that are particularly pertinent in contexts characterized by social risk, given the intricacies associated with evaluating parental figures in such circumstances and the relevant role of the assessment process. These assessments often determine the decision of whether a child remains within the family unit or faces separation.

Instrumentos de Evaluación de Competencias Parentales: Una Revisión Narrativa de Aspectos de Intervención Social

RESUMEN

La evaluación de competencias parentales en los servicios sociales de atención a la infancia es una función imprescindible en la valoración de las situaciones de posible desamparo de niños, niñas y adolescentes. También es importante para los psicólogos forenses presentes en los juzgados de familia que elaboran informes periciales sobre regulación de guarda y custodia en casos de litigio entre los progenitores. Asimismo, es relevante en los procesos para la selección de familias adoptivas y de acogida. La presente revisión describe los principales instrumentos disponibles en lengua española publicados en los últimos 20 años. El estudio se centra en los instrumentos relevantes en contextos de riesgo social, a causa de la dificultad de evaluación de las figuras parentales en dichas situaciones y la importancia del proceso de valoración del que depende, en muchos casos, la permanencia o la separación del menor del núcleo familiar.

Palabras clave

Evaluación de competencias parentales
Parentalidad positiva
Familias en riesgo
Intervención social
Revisión narrativa

In recent decades, intense social changes have been experienced in European and Spanish families, with a greater diversity of types of family, smaller extended families, and a trend towards more egalitarian and democratic values in household unit, among other things, which have led to family scenarios becoming more complex and families perceiving greater challenges in carrying out their parenting functions (Ayuso, 2019; Rodrigo et al., 2015; Rodrigo & Palacios, 1998).

In turn, the European Parliament and the European Council have established a series of recommendations to member states to initiate family support policies that include responsible parenting and education practices, particularly in contexts of social risk, where parents face more adversities when carrying out their important task. Of particular note is Recommendation 2006/19 of the Council of Europe, which defines the term positive parenting as "parental behavior based on the best interests of the child, which is nurturing, develops the child's capacities, is non-violent, and offers recognition and guidance, including the setting of limits to enable the child's full development" (Consejo de Europa, 2006). In subsequent years, the European Commission has given its approval to Recommendation 2013/112, which focuses on preventing poverty and promoting the well-being of children (Comisión Europea, 2013). This recommendation highlights the need to strengthen support for families and improve the quality of care alternatives available, such as strengthening child protection and children's social services in the field of prevention. Similarly, it is committed to supporting families in the development of their parenting skills, without stigmatizing them and ensuring that children receive an education in an environment that meets their needs.

There have been different programs on parental competencies developed in recent years, in Europe, North America, and Asia, with the aim of promoting healthy lifestyles for children. The results of these programs are encouraging, although further research is still required to achieve consistency in the observed changes (see review by Ruiz et al., 2018). Along these lines, parenting education programs aimed at social service groups have been developed in Spain with the objective of improving their parenting skills (Amorós et al., 2012; Jiménez et al., 2020; Martínez, 2009; Rodrigo et al., 2010). An adjusted level of parenting skills in parents is positively correlated with higher adaptive functioning of children, as well as with greater development of their well-being and resilience (Rodríguez & Rodríguez, 2019; Rodríguez et al., 2020).

In the same way, the evaluation of parental competencies is a crucial factor in three specific areas of the psychology of social intervention in families and children. Firstly, it is essential within the assessment processes of possible situations of child neglect within the child and adolescent protection system. It is also crucial in judicial contexts where the guardianship and custody of children is determined as the parents undergo legal proceedings of separation. And, finally, it is also important in the processes of suitability and selection of candidates for foster families and adoption.

Parental competencies are defined as the set of skills that enable parents to undertake, in a flexible and adaptive way, the vital task of parenting; contemplating the evolutionary and educational needs of their children, taking into account the standards considered acceptable by society, and taking advantage of all the opportunities and support offered by the systems influencing the family and its

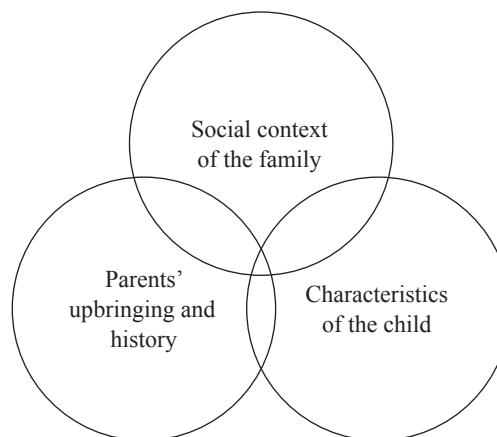
context to deploy these capabilities (Rodrigo et al., 2008; Rodrigo et al., 2009; Rodrigo y Byrne, 2011). It implies adaptive responses to the challenge of parenting, taking into account affective, cognitive, communicative, and behavioral dimensions in the different contexts and the life and learning scenarios where they are developed (Masten & Curtis, 2000). Thus, a positive and responsible parenting performance implies parenting based on affection, support, communication, stimulation, structuring in routines, establishing limits, rules and consequences; without forgetting the importance of maintaining involvement and accompaniment in the daily life of sons and daughters (Rodrigo et al., 2015).

In turn, in order to carry out a correct assessment of parental competencies, three basic pillars must be taken into account. Firstly, the social context in which the parental figures live (educational and socioeconomic level of the parents, community resources in the family's area, etc.), since parenting develops in a specific historical, social, and geographical moment that influences the family. Next, the parents' own history and upbringing and how they have constructed their childrearing context (parenting styles, individual histories of difficulties in the families of origin, etc.). And finally, the children's own characteristics (developmental problems, mental or sensory disabilities, etc.) (White, 2005) (Figure 1).

Traditionally, explanatory models of parenting were reduced to the attempt to determine the educational styles employed by parents, i.e., authoritarian, permissive, or democratic (Baumrind, 1996), and how these had an impact on the children's development. Subsequently, models have been incorporated that evaluate the parents' perception of their own role and the vision that parental figures have of the children (Albanese et al., 2019; Bayot et al., 2005; Cabrera, 2013), as well as the vision that sons and daughters have of their own parents (Cabrera, 2013; Richaud de Minzi, 2002). We must also take into account the theoretical models of parenting and care of dependent persons that have attempted to develop the construct based on the assessment of different personality variables of the main caregivers (flexibility, sociability, and the ability to establish attachment, among others) (Bermejo et al., 2006).

In recent years, following Martín et al. (2013) and Hidalgo et al. (2020), inspired by ecological and contextual models, assessment scales have been developed for the aforementioned construct that

Figure 1
Elements to be Assessed in the Assessment of Parental Competencies



incorporate personal aspects of the parental figures, as well as the family's closest social contexts; thus overcoming more reductionist paradigms that attempted to account for parenting based on the educational styles or personality of the parents, which were more static and deterministic. In this way, it is understood that, in today's society, parenting involves different levels that must be appropriately addressed: personal (as a developmental task and personal realization), dyadic parenting (affective bonding established with the children that offers trust and security), parental team (co-parenting and complementary parenting), and social parenting (social networks of support and development in the community) (Rodrigo et al., 2015).

Objective of the Study

The review presented here aims to offer an analysis of the advantages and disadvantages of a selection of the main instruments available in Spanish for assessing parental competencies for Spanish-speaking professionals in the field of social intervention in families and children, especially those working in contexts of social risk, where in recent years assessment tools for the construct in question have been published that may be of great interest, the knowledge and application of which can facilitate decision-making in this difficult field of work.

Method

The importance of parenting has led to research around the world seeking how to intervene and measure different aspects of this construct (Bruna et al., 2021; Rodríguez et al., 2021). Based on the review work of Bruna et al. (2021), a search was conducted in the Google Scholar database with the keywords "parental competencies," "parental competencies assessment," and "parenting," and the instruments available in Spanish language and published in the last 20 years (2003-2023) were selected. The importance of including only works published in Spanish and for Spanish-speaking populations, lies in the geographical and cultural proximity of the construct itself to avoid possible interpretative biases in the translation of the concept. In fact, in recent years the construct of "parentality" has been used in numerous social and medical sciences, and although a universal value is configured in all of them, slight conceptual differences can also be appreciated (Danilova et al., 2019). It is worth remembering that, although the concept of "parentality" or "parenting" has been widely used in the academic world in recent decades, the *Dictionary of the Royal Spanish Academy* still does not include the Spanish word "parentalidad" (Rodrigo et al., 2015).

A narrative review of the literature was carried out with the aim of producing a broad description of the instruments included as well as their key aspects (Popay et al., 2006). The narrative review method was chosen because it was best able to adapt to the selected inclusion criteria, i.e., they were important instruments due to knowledge of their experiential use in evaluation contexts carried out by public or private institutions, tools applicable to social risk contexts, taking into account the peculiarities of this population and, finally, they included both the time of administration and the necessary prior training of professionals, since these are professional areas with a high care load.

Results

Ten instruments were obtained, of which five were developed in Spain, four in Chile, and one in Argentina. Most of them are self-administered (70%), although 30% are administered by a professional.

The following is a summary of the instruments analyzed in chronological order (Table 1):

The *Escala de Competencia Parental Percibida para Padres y Madres* [Perceived Parental Competence Scale - parent versión] (ECP-p in Spanish, Bayot et al., 2005), developed by the University of Castilla-La Mancha, based on a sample of 1,074 parents of children aged 3 to 18 years, from different Spanish provinces, users of social services or parents of students in educational centers. It consists of 22 self-administered items with a Likert-type scale with scores ranging from 1 ("Never") to 4 ("Always"). It evaluates five factors or areas: school involvement, personal dedication, shared leisure, advice/guidance, and assuming the role of being a parent (e.g., *I congratulate my children every time they do something well*).

The *CUIDA* questionnaire (*Cuestionario para la evaluación de familias, adoptantes, cuidadores, tutores y mediadores* [Questionnaire for the evaluation of families, adopters, caregivers, guardians, and mediators]) (Bermejo et al., 2006; García et al., 2007) was developed by the Equipo de Intervención y Valoración en la Adopción Internacional del Colegio Oficial de Psicólogos de Madrid [the Intervention and Assessment Team for International Adoption of the Madrid Psychological Association], with a total sample of 720 subjects, including the general population and adopters. It consists of 189 self-administered items with a Likert-type scale and a range of scores from 1 ("Disagree") to 4 ("Agree"). It includes the evaluation of 14 caregiver personality variables: Altruism, Openness, Assertiveness, Self-esteem, Problem-solving ability, Empathy, Emotional balance, Independence, Flexibility, Reflexivity, Sociability, Frustration tolerance, Ability to establish affective or attachment bonds, Grief resolution ability, 3 validity and response control indices, and 4 second-order scores: Responsible caring, Affectionate caring, Sensitivity to others, and Aggressiveness (e.g., *I like meeting new people*).

The *Escala de Estilos Parentales e Inconsistencia Parental Percibida* [Parenting styles and Perceived Parental Inconsistency Scale] (EPPIP, De la Iglesia et al., 2010) was developed by the University of Buenos Aires based on a sample of 373 students and aims to measure the perception of parenting styles in young adults. The EPPIP is a self-administered inventory that presents 24 situations in which the evaluated individuals must respond on a Likert-type scale, between 1 ("Never") and 4 ("Always") according to the reactions that the parents of the evaluated subjects may have experienced during their adolescence. Subsequently, each item is complemented with a second question for each situation in which the participant must answer whether the reaction of that educational agent was the same in identical circumstances. The response assumes a dichotomous *Yes or No* format (e.g., *If you did this on several occasions, did your father/mother always react that way?*). The scale measures parental responses according to six subscales: Affection, Dialogue, Indifference, Verbal Coercion, Physical Coercion, and Prohibition. They are also grouped into two major scales: response and demand (e.g., *My parent would have shown satisfaction if I had helped without being asked to do so*).

Table 1
Summary of Instruments Reviewed

Instrument, authors, and year	Sample			Items	Internal consistency	Type of administration	Constructs measured
	Country	Origin	n				
Escala de Competencia Parental Percibida para Padres y Madres [Perceived Parental Competence Scale - parent version] (Bayot et al., 2005).	Spain	Parents of children from 3 to 18 years old, users of social services or educational centers.	1,074	22	Cronbach's Alpha = 0.86	Self-administered	School involvement, personal dedication, shared leisure, counseling/guidance, and assuming of parental role.
Cuestionario para la evaluación de familias adoptantes, cuidadores, tutores y mediadores [Questionnaire for the evaluation of adoptive families, caregivers, guardians, and mediators] (CUIDA) (Bermejo et al., 2006).	Spain	General population and candidates for adoption.	720	189	Cronbach's Alpha = 0.74	Self-administered	Altruism, openness, assertiveness, self-esteem, problem-solving skills, empathy, emotional balance, independence, flexibility, reflexivity, sociability, frustration tolerance, bonding and attachment skills, grief resolution skills, validity and response control indices, and second-order scores: responsible care, affectionate care, sensitivity to others, and aggressiveness.
Escala de Estilos Parentales e Inconsistencia Parental Percibida [Parenting styles and Perceived Parental Inconsistency Scale] (EPPIP) (De la Iglesia, 2010).	Argentina	University students between 19 and 35 years of age.	373	24	Cronbach's Alpha = 0.66	Self-administered	Affection, dialogue, indifference, verbal coercion, physical coercion, and prohibition. These are also grouped into two major scales: response and demand.
Escala de Evaluación Familiar de Carolina del Norte [North Carolina Family Assessment Scale] (NCFAS) (Valencia & Gomez, 2010).	Chile	Families using the child protection system with indicators of a high risk of child abuse and/or neglect.	528	36	Cronbach's Alpha between 0.77 and 0.94	Externally-administered	Environment, parental competencies, family interactions, family safety, and child well-being.
Escala de Competencia y Resiliencia Parental [Parental Competence and Resilience Scale] (Martín et al., 2013).	Spain	Families using municipal social services.	498	63	Ordinal alpha between 0.68 and 0.97	Externally-administered	Parental agency, health promotion, domestic organization, personal autonomy and seeking support, educational skills, personal development, cognitive competencies, emotional competencies, relationship with the community, and attitude towards social services.
Escala Parental Breve [Brief Parenting Scale] (EPB) (Cumsille & Loreto, 2014).	Chile	Adolescents.	1,426	12	Cronbach's Alpha between 0.75 and 0.88	Self-administered	Responsivity/warmth, parental demand, and parental monitoring practice.
Escala de Parentalidad Positiva [Positive Parenting Scale] (e2p) (Gómez & Muñoz, 2015).	Chile	General population, caregivers of children aged 1 to 17 years and families with abuse and parental neglect.	333+50	54	Cronbach's Alpha = 0.97	Self-administered	Bonding, teaching, protection, and reflection.
Entrevista de Evaluación de Competencias Parentales [Interview for the Assessment of Parental Competency] (ECP-12) (Hidalgo et al., 2020).	Spain	Fathers and mothers, users of the Red Cross family intervention program.	496	53	Cronbach's Alpha = 0.97	Externally-administered	Stimulation and structuring; shared family time; shared parental responsibility; developmentally appropriate beliefs and expectations; affection, communication and acceptance; school involvement; rules and supervision; emotional self-regulation; appropriate perception of parental role; coping with stressful situations; social support; and financial management.
Escala de Educación Familiar [Family Education Scale] (EEF in Spanish) (Reparaz et al., 2021).	Spain, Peru, Mexico, and Chile	Students from 12 to 15 years old.	2,459	35	Cronbach's Alpha between 0.55 and 0.85	Self-administered	Parental demand, parental affection, strengths-based training, and education in privacy.
Escala de Competencia Parental en el Ámbito de Urgencias Pediátricas Hospitalarias [Parental Competence Scale in the Pediatric Hospital Emergency Setting] (ECP-U) (Montoro et al., 2023).	Spain	Parents of children aged 0 to 14 years in a hospital emergency department.	270	18	Cronbach's Alpha between 0.74 and 0.92	Self-administered	Emotional management and expression, passive social support, parental agency, basic needs and care, and active social support.

The Spanish version of the *North Carolina Family Assessment Scale* (NCFAS, Reed, 1998) was developed by the Pontificia Universidad Católica de Chile (Valencia & Gómez, 2010), based on a sample of 528 participants from various family intervention programs for the prevention of maltreatment. It consists of 36 items administered by professionals based on home visits and interviews (e.g., *Safety in the community*) that must be scored between +2 and -3 points. The Scale measures five dimensions: Environment, Parental Competencies, Family Interactions, Family Safety, and Child Well-Being.

The *Escala de Competencia y Resiliencia Parental* [Parental Competence and Resilience Scale] (Martín et al., 2013) was developed by the University of Las Palmas de Gran Canaria and the University of La Laguna in Spain based on a sample of 498 cases of families at social risk. It consists of 63 items administered by professionals on a Likert-type scale of 5 responses between 1 ("Not at all") and 4 ("Very much"). The Scale measures 10 competency areas: Parental Agency, Health Promotion, Home Organization, Personal Autonomy and Support Seeking, Educational Skills, Personal Development, Cognitive Competencies, Emotional Competencies, Relationship with the Community, and Attitude towards Social Services (e.g., *He/She feels effective and capable as a parent*).

The *Escala Parental Breve* [Brief Parenting Scale] (EPB, Cumsille & Loreto, 2014) was developed by the Pontificia Universidad Católica de Chile, Universidad de Valparaíso, and Oberlin College based on a sample of 1,426 Chilean adolescents. It consists of 12 self-administered items in which adolescents must respond on the perception of parental behaviors using a Likert-type scale between 1 ("Strongly disagree") and 5 ("Strongly agree"). It is composed of 3 subscales: two of the scales assess dimensions of parental style (responsiveness/warmth and parental demand) and one assesses parental monitoring practice (e.g., *I can count on their help if I have problems*).

The *Escala de Parentalidad Positiva* [Positive Parenting Scale] (e2p, Gómez & Muñoz, 2015) was developed by the Fundación Ideas para la Infancia [Ideas for Children Foundation] in Chile, based on a general population sample of 333 parents and a sample of 50 families with severe parenting difficulties. It consists of 54 self-administered items to be answered using a Likert-type scale between 1 ("Almost never") and 4 ("Always"). The scale identifies parental competencies grouped into the following four areas: Bonding, Teaching, Protection, and Reflection (e.g., *I make time to play and have fun with my baby*).

The *Entrevista de Evaluación de Competencias Parentales* [Parental Competence Evaluation Interview] (ECP-12; Hidalgo et al., 2020) was developed by the University of Seville and the Spanish Red Cross based on a sample of 496 families. It consists of 53 indicators administered by a professional in the context of a semi-structured interview whose scores range from 1 ("Not at all") to 5 ("Completely"). The instrument assesses 12 dimensions: Stimulation and structuring, Shared family time, Shared parental responsibility, Developmentally appropriate beliefs and expectations, Affection, communication, and acceptance, School involvement, Rules and supervision, Emotional self-regulation, Adequate perception of parental role, Coping with stressful situations, Social support, and Financial management (e.g., *What is a day in the life of your family like? What do your children do from the time they get up to the time they go to bed?*).

The *Escala de Educación Familiar* [Family Education Scale] (EEF; Reparaz et al., 2021) was developed by the University of Navarra based on a sample of 2,459 students aged 12 to 15 years in Spain, Peru, Mexico, and Chile. It consists of 35 self-administered items to be answered by adolescents on the perception of their parents, using a Likert-type scale between 1 ("Not at all, Never") and 5 ("Completely, Always"). Four grouped parental competencies are identified: Parental Demand, Parental Affection, Strengths-Based Parenting, and Privacy Education (e.g., *They set an example for you*).

The *Escala de Competencia Parental en el Ámbito de Urgencias Pediátricas Hospitalarias* [Parental Competence Scale in the Pediatric Hospital Emergency Setting] (ECP-U; Montoro et al., 2023) was developed by the University of Alicante based on a sample of 270 parents of children aged 0 to 14 years in an emergency department in Valencia. It consists of 18 self-administered items to be answered by the parents, using a Likert-type scale between 1 ("Completely disagree") and 5 ("Completely agree"). Five groups of parenting competencies are identified: Emotional management and expression, Passive social support, Parental agency, Basic needs and care, and Active social support (e.g., *When my child is irritable, I can identify the causes (e.g., I can tell if he/she is cranky because he/she is tired, hungry, or sick)*).

Discussion

In the present review, a summary has been made of the parenting competency assessment instruments published in the last twenty years in Spanish that may be of interest to professionals in the field of social intervention with families and children. Although there are other recent reviews of instruments for assessing aspects related to parenting, such as perceived parental efficacy (Wittkowski et al., 2017) or parental attitudes and skills (Hurley et al., 2014), there has not been a review of the similar instruments available in the Spanish language so far.

First, most of the instruments reviewed correspond to self-administered scales, which are intended to be completed by the person from whom the information is to be obtained. However, self-administered assessment instruments, based exclusively on the perception of the parents, and especially in contexts of social and judicial risk, can be biased for several reasons. First, the self-perception of parental competence in families at social risk tends to be overestimated, while in normalized families these competencies tend to be underestimated (Rodrigo et al., 2006). In addition, the evaluations carried out by the protection or judicial system are not voluntary on the part of the evaluated parents. Caregivers are summoned by the administration at its own initiative in almost all situations (De Paul & Arruabarrena, 2007). This causes a high response of social desirability on the part of the parents in the face of the existing fear of the conclusions of this assessment (from a modification of the custody of the children to a possible abandonment of the minors and separation from the family nucleus). Finally, it should be remembered that families at social risk tend to have lower levels of education than the population average and greater cultural diversity than in normalized profiles (Save The Children, 2020), so they may have difficulties in understanding the questions of the self-administered scales. One way to try to avoid these biases is to add additional questions to assess the truthfulness of the answers in

relation to the propensity to withhold information or give false answers. In the review carried out, only the CUIDA Scale (Bermejo et al., 2006) has a scale of social desirability and two indices of invalidity and inconsistency of responses that would allow the validity of the answers given to be gauged. However, it is the most extensive scale of those investigated, with a total of 189 items and, therefore, the one that would require the most time to evaluate, which should be taken into account.

Thus, it is the professionals involved in the family nucleus who can provide a more valid evaluation, since it is they who will have to defend their conclusions and evaluations before the administrative or judicial authorities, in cases of opposition or judicial appeal to the possible measures proposed. However, it should be noted that, of the ten instruments reviewed, only three are externally-administered scales. Externally-administered scales or "observer scales" (Bech et al., 1993) are completed by an external examiner who requires different levels of training. In the case of families at social risk, an average knowledge of the family environment and parental behaviors collected in different contexts (school, health, leisure, etc.) is also required to avoid biases in the observation and to obtain greater validity in the responses recorded. This requires a significant investment of time in the training of the evaluator, which will not always be possible. In this sense, it is important to take into account the great care pressure in the family and child social intervention services, at which the use of these instruments is directed. For this reason, the prior training time for professionals to become familiar with the tool, as well as the time required to administer the tests and the analysis, should be taken into consideration before selecting one of these instruments. The objective must always be to avoid delaying, for example, protection measures in situations of child or adolescent neglect or regulatory sentences of guardianship and custody within the judicial domain, since this may have a negative impact on the evolutionary development of the children for whom the intervention is aimed. Unfortunately, it is common for protective measures in the child protection system to be taken late or once the child or adolescent already shows a high level of distress due to the situations experienced in the family context (Rodrigo et al., 2008).

In relation to the variable of perceived parental competencies, three of the instruments reviewed (Bayot et al., 2005; Cumsille & Loreto, 2014; De la Iglesia et al., 2010) constitute scales of parental behaviors perceived by adolescent or young adult children who respond based on recent recollection of their parents' behaviors. This way of obtaining information, coming from the subject's own (self-referential and experiential) account, activates episodic memory processes and as such may be subject to contextual suggestibility processes that should be taken into account in the assessment of parental competencies (Juárez et al., 2023). It could be of interest for future research to compare the parental skills perceived by the parents themselves and those reported by their children in order to observe differences that, undoubtedly, in many cases will be significant. At the same time, the existence of a possible dynamism in the perception of parental skills perceived towards parents throughout the life course should be taken into account. Classic authors of literature, such as Oscar Wilde, have highlighted in their works the change of perception regarding parental figures that occurs depending on the subjects' current stage of the life cycle; "Children begin by loving their parents; as they

grow older, they judge them; sometimes they forgive them." (Wilde, 1890/2006, p. 28).

Finally, a significant factor to take into account in the evaluation of the construct is the disparity between internal (self-administered) and external (externally-administered) assessments that can occur when situations of violence, serious mental health problems, or drug use are recorded in the *parental ecology* (Rodrigo et al., 2015). In these families where there are suspicions of child abuse or serious neglect, reactions of denial or minimization by the parents of situations compatible with abuse are common (Pereda & Almirall, 2004). These circumstances lead to serious problems in the exercise of parental competencies. In turn, awareness of the problem is a key aspect in obtaining a positive or negative prognosis of recovery of parental skills in the processes of examination of situations of child and adolescent neglect (De Paul & Arruabarrena, 2007; Departamento de Empleo y Políticas Sociales del Gobierno Vasco [Department of Employment and Social Policies of the Basque Government], 2017).

Of the three externally-administered scales reviewed, the scales of Martín et al. (2013) and Hidalgo et al. (2020) are noteworthy for their geographic and cultural proximity. One of the most interesting aspects is that both instruments incorporated aspects of the family environment in their construction, without influencing personality variables or the parents' own behavior. In current ecosystemic models, it is understood that certain difficulties of temperament in parents can be compensated if there is a correct use of community resources and if caregivers accept the guidance and help they are able to receive from their support networks, both formal (educational or health resources) and informal (family, friends, or neighbors) (Barudy & Dantagnan, 2010; Cabrera, 2013; Rodrigo et al., 2015).

When selecting the most suitable instrument, it should be borne in mind that psychologists and professionals in the field of social intervention usually work in public administrations (local or regional) under great pressure in the provision of care (social services, specialized social services for the protection of children and adolescents, or technical teams in emergency shelters, among others). The high care pressure involves maximum prioritization of human resources and correct organization of intervention time, which is why the time variable of prior training of professionals required for the use of these instruments, as well as the administration time of assessments, is of interest. In this case, the scale of Martín and collaborators (2013) is the one that provides the most adapted and reasonable proportion, of both the time previously required for familiarization with the tool and for administration and data collection. The instrument by Hidalgo et al. (2020), being a semi-structured interview, requires more time for training and prior familiarization with the competencies described and, subsequently, more time to analyze the results. Notwithstanding this drawback, the ECP-12 Scale offers a context of natural and non-intrusive conversation with the families evaluated, as well as certain visual supports that facilitate the approach to some of the contents. As it is a "shared evaluation" between the professional and the family, it can generate elements of improvement in the moment and guide the subsequent intervention, taking into account the paradigm of positive parenting. At the same time, the semi-structured interview model facilitates proximity between professionals and parents from different cultural backgrounds, so that the former can clarify and relativize parenting aspects in order to reduce the probability of falling into cultural biases in data collection.

The externally-administered scale of Martín et al. (2013) and the semi-structured interview of Hidalgo et al. (2020) are therefore the most recommended, after the review carried out, in the contexts of social intervention in family and childhood, given that they allow us to measure the complex construct of parental competencies based on the current ecological and contextual models. These two tools make it possible to assess parental competencies, taking into account the families' resources and strengths, and not only the elements of risk and lack of protection, thus connecting with current practices of positive parenting that, as has been found, bring significant benefits to parents and their children (Rodrigo, 2016).

As limitations, regarding the narrative review methodology, the lack of systematization in the inclusion of these scales should be highlighted, even though it was selected taking into account the scarcity of available Spanish-language works and the need to analyze from a critical and expert perspective the different existing scales to bring this analysis closer to the professional teams that must make highly significant decisions for families. With regard to the contents included, there is a lack in the selected instruments of complementary scales that measure constructs specific to the life experience in question, such as parental stress (Louie et al., 2017). This, combined with other life stressors such as poverty, single parenthood, a conflictive separation between parents, or migration processes, increases the likelihood of having difficulties in the development of parenting skills (Cummings et al., 2005; Martins et al., 2023). At the same time, it is necessary to obtain representative samples of populations from the various regions of Spain in order to extend those initially collected (Canary Islands and Andalusia). This would provide more robustness to the scale of Martín et al. (2013) and the interview of Hidalgo et al. (2020), and it would allow them to be adapted to the different co-official Spanish languages (Catalan, Valencian, Basque, and Galician). It should be recalled that competencies in the child and adolescent protection system are delegated to the autonomous communities (Casas, 1994) and the co-official languages are used significantly in the technical reports and assessments of each region.

Conclusions

In recent years, instruments have appeared in Spanish that offer high levels of validity and reliability in the assessment of the revised construct, as presented in this review, although they continue to be scarcely used in the technical processes of assessing family situations. On the other hand, these assessments have a direct impact on the lives of hundreds of children in Spain and for this reason the rigorousness of the procedures carried out should be taken into account, as well as the use of instruments that are duly validated and empirically supported. Likewise, public administrations and entities that perform concerted functions for public services should reserve training spaces that allow the different professionals in the area of social intervention (within the field of teaching, social work and education, and psychology, among others) to improve the rigorousness of parental competency assessments through training in the use of assessment tools. The great pressure to which these services are subjected means that the use of these instruments is not only within the reach of psychology professionals, but also of other university graduates in social

intervention who will need to have undergone prior training and familiarization with the assessment tools. In all cases, the ethical guidelines on the use of these tests must be followed, as well as the relevant guidelines available for a correct assessment process (Fernández-Ballesteros et al., 2003; Muñoz et al., 2015).

Conflict of Interest

The authors declare that there is no potential conflict of interest related to the article.

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