

Emotional Parenting Distress and Construction of Online Resources

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Abstract

The purpose of this study is to construct emotional parenting resources and understand emotional parenting difficulties of parents. A qualitative research method with focus group interview was utilized, with the subjects being ten caregivers of children aged 3-6 years. The data were analyzed by content analysis, producing the following criteria: Content goals of online resources related to promoting a sense of competence in parenting, promoting parenting knowledge for emotional processing, promoting knowledge for seeking mental health resources, reducing parenting stress, promoting communication, and expert consultation forums; and resource content relating to assessment of the primary caregiver's parenting style, sense of competence and physical and mental status, assessment of children's emotional state and temperament, knowledge of emotional development and processing, situational examples, mental health resources, parenting resources, communication and interaction promotion knowledge and expert consultation forum. The disturbances of parenting among caregivers in the focus group were focused on communication difficulties, high persistence in children's behaviors, their inconsistent performance at school and at home, deciding when to allow children to become more independent, how to comfort children using application of soothing dolls or toys, and disagreements between elders and parents.

Keywords: Emotional parenting, Internet resources, Parents, Preschool children.

1. Introduction

Parents play an important role in supporting young children to achieve success in learning when they enter school, and for this reason, it is worth engaging parents in collaboration for improving high-quality early childhood education [1]. In recent years, parenting courses that promote children's early social and emotional development have been a topic of interest to many school staff and practitioners. The model of emotional socialization includes parenting beliefs and attitudes about children's emotions, expressing one's own emotions, responses to children's emotions, and scaffolding for understanding children's emotions. However, there are currently very few social-emotional programs aimed at increasing the social-emotional abilities and self-regulation skills of infants and preschoolers [2]. Parenting plays an important role in children's mental health, so evidence-based parenting programs that nourish positive parenting and meet the needs of children and parents are necessary [3].

Self-regulation ability can help children concentrate, follow teachers' instructions, and

reduce aggressive reactions when having conflicts with classmates. Reducing ineffective parenting, increasing parental investment in kindergarten teaching activities and teaching parents how to assist pre-school children can increase children's preparation skills for entering school [4]. Acknowledging children's emotions means being able to truly perceive and label emotions that can predict high-quality peer relationships, higher social competence, higher academic achievement, fewer problem behaviors, and predict early development of emotional knowledge of children [5]. Accordingly, this study focuses on the emotional education for parents toward children in the preschool period.

With mobile phones now becoming an essential daily necessity, applications related to smart phones are developing in multiple ways as mini-computers [6]. The rapid development of mobile phones can overcome the limitations of health intervention for large groups [7]. With the use of mobile phones currently increasing rapidly around the world, the technology of using a mobile phone has increased parents' ability to discover the milestones of children's growth while providing

opportunities for increasing parents' involvement in monitoring children's development [8]. Providing information from the Internet is a cheap and simple method, making it easier for professionals to provide information to parents and discuss with them. Parents can use such knowledge and tools at their leisure, and the data of parenting knowledge can be downloaded to their mobile phones for free [9].

Innovative intervention models that use technology-based platforms could be an effective way to support parents. There is research on designing a four-week mobile phone intervention for adolescent parents using mobile phones to send text messages, including guidelines related to bringing up adolescents, offering information and emotional support, with the project goals being (1) Promoting a sense of competence in parenting; (2) Continuing to promote a sense of competence; (3) Promoting knowledge of depression for parents; (4) Promoting knowledge of seeking mental health resources; (5) Reducing parenting stress; and (6) Promoting communication between parents and teenagers. Finally, this research determined that it can effectively provide parental support, increase parenting abilities and mental health literacy, identify behaviors that require assistance early for teenagers while providing low-cost, continuous parenting intervention and provide services to a wide range of people from different ethnic groups [10].

At present, there are a mere few studies using applications in education, such as mobile phone health intervention research on children and adolescents [10] and support-empowerment-learning-education-initiative program [11]. There are studies in Taiwan using the Android platform to develop Android applications, including campus navigation and Chinese fruit plate games [6], but there are few studies using websites or mobile phones on parenting research.

Some online resources include (1) Infoaboutkids.org: This website offers information about behavioral science on children and adolescents; (2) Effectivechildtherapy.org: The site helps parents understand whether child's behaviors are normal or not, and offers guidance on selecting a suitable psychologist; (3) ACT Raising Safe Kids Program (Go to alankazdin.com

and search for "ABCs."): this eight-week class teaches positive parenting skills to parents and helps them foster safe, stable, healthy and nurturing environments for younger children while the ACT website, www.apa.org/act, provides caregivers with insights about this program and finds tips on how to handle the problems of their children; (4) Everyday Parenting: This is a free online parenting course that provides 20 how-to videos explaining parenting techniques about how to manage children's problem behaviors at home and school; (5) Resilience Booster (Go to www.apa.org and search for "Booster."): this site provides parents with tips on how to boost children's resilience when they face adverse experiences; and (6) Magination Press (Go to www.apa.org and search for "Magination."): the American Psychological Association's children's book imprint offers more than 180 titles to help professionals and parents' guide children in situ, such as starting school, shyness, parental divorce, autism, trauma and death [12].

There is a lack of apps specifically targeted at emotional parenting and other related areas, so this study intended to develop mobile apps to assist parents in emotional parenting. Additionally, because it is time-consuming to make a mobile application, this research is currently under development, so we also use a website to post parenting information while holding an online group for parents with emotional parenting problems to discuss parenting issues that trouble parents, and organize the information into online resources.

The purpose of this study is to construct emotional parenting resources and understand emotional parenting difficulties of parents.

2. Method

Qualitative research with focus group interview method was utilized where the subjects were ten caregivers of children aged 3-6 years; nine women and one man. Their education levels were 10% high school graduates and 90% above college graduates; mean age was 35 years. For constructing emotional parenting resources, three undergraduate students of the Health Psychological Department and one undergraduate student in the Department of Information

Engineering (three women and one man) were responsible for collecting and organizing the parenting data and place this on the website.

The research subjects were recommended by the kindergarten principal and participated after obtaining the consent of the children's parents. Before focus group interviews, informed consent was obtained from all participants. The protocol for this study was approved by National Cheng Kung University Human Research Ethics Committee (No. 111-566).

The focus group was held for 120 minutes. The leader was the author who is a certificated and licensed psychologist with sixteen years of experience working with children and parents. The group was held on "Google meet", with the group process recorded and translated into transcript. The focus group process was as follows: (1) Group formation (10 minutes) where group members introduce and share expectations; (2) Group goal introduction (5 minutes) where the group goal was to discuss the content required for mobile applications and the emotional problems of children; (3) Discussion on discipline troubles (70 minutes) with focus on the processing of children's negative emotions and other troubling issues; and (4) Discipline resources and principles (15 minutes) with an introduction to discipline principles and resources.

Afterwards, the focus group content was organized into transcribed text, and after data content analysis, a reference for the content of online resources was provided. The code in text indicated N1-1 meant it was the first group member and first talk in the group, with () meaning that the author added the text to make it easier to understand.

The parenting source was restricted on the website (<https://reurl.cc/N4YyYe>) that included goals, data guidelines, texts and films of parenting. The author referred to the literature to set data objectives and emotional education content [8] [11]. The results in content analysis of focus group process were developed to offer the data of expert consultation forum that would gather parents' questions and respond to them.

3. Results

The goals of the online source were offered for parents to achieve the following goals: (1)

Promote a sense of competence in parenting; (2) Promote parenting knowledge for emotional processing; (3) Promote knowledge for seeking mental health resources; (4) Reduce parenting stress; (5) Promote communication with children (Johnston & Mash, 1989); and (6) Provide an expert consultation forum [13].

The content of the online source were: The content of parenting knowledge being (1) Assessment: Assessment of the primary caregiver's parenting style, sense of competence in parenting, and physical and mental status, and assessment of children's emotional state and temperament; (2) Emotional development and processing knowledge of children, including situational examples; (3) Mental health resources; (4) Educational resources of parenting; (5) Knowledge of improving parent-child communication and interaction; (6) Expert consultation forum that included problem discussion, reference questions and examples of parenting, design question classification and response content [8] and text message responses [11] (Fig. 1 & 2).

The disturbances of parenting among caregivers in the focus group were communication difficulties, high persistence in children's misbehaviors, inconsistent performance at school and at home with children, determining when was a good time to allow developing independence, how to comfort children, using the application of soothing dolls or toys, dealing with disagreements between elders and parents, worry about children being abnormal, worry about children's sex tendency, and how to accompany children (Table 1).



Fig. 1. Screen capture of the parenting resource website

建構內容的目標為:	程式及網頁大綱:
(1)促進教養的擔任感	(1) 評估：主要照顧者教養型態、擔任感及身心狀態評估、兒童情緒狀態及實質評估(表3)
(2)促進情緒處理的教養知識	(2) 情緒發展及處理知識：情緒舉例處理
(3)促進尋求心理健康資源的知識	(3) 心理健康資源
(4)減少教養壓力	(4) 教養資源
(5)促進溝通(Johnston & Mash, 1989)	(5) 電子溝通互動促進知識
(6)專業諮詢論壇 (Liet al., 2021)	(6) 專業諮詢論壇：包括：問題討論：參考問題及刺激回應之例子、設計問題分類及回應內容 (Kinas-Wekub, 2021)及資訊回應(Kang, 2020)。
	(7) 影片參考專區

Fig. 2. The goal and outline of parenting resource

Table 1: The theme and text in content analysis

Theme	text
communication difficulties	Often when we were communicating with him (4 years old), we adults might think very directly...for example, why didn't you just put your pants on? Well, or didn't you just put your clothes on, ah? Just zipped it up? Ah, sometimes he just... would tell you whether it was coquettishness or a tantrum, but he just didn't want to wear it. I was talking to him rationally then, and there seemed to be no way to make him really do it within the time limit, like taking off clothes before going to school and after returning home. (N1-1)
high persistence in children's misbehaviors	I had a problem with my children's upbringing. When my child encountered a problem or encountered something he didn't like, he would lie on the ground. He would lie on the ground and not get up. Then when I told him, he would be very persistent, that was, you might cooperate with him, then he could get up. He was very persistent. No matter how you told him, he would not be able to listen, which made me very troubled. (N2-1)
inconsistent performance at school and at home with children	My two children were both boys, and the eldest is currently in the sixth grade of elementary school, and the younger brother is in the senior class in Kindergarten. The younger boy's teacher said that he was very shy in school, and his personality was quieter. Then when I came back home, I relayed this sentence to the eldest boy. The eldest boy said: No way, his ears were almost broken at home because of the younger brother. My brother didn't have that kind of personality at all! Then we also wondered why he was so quiet in school?..... his personality was completely different from at home and in school. (N6-2)
when was a good time to allow developing independence	Can I just guide him (to be independent), because some elders would even suggest to me: Was it to train the child to be independent, that was, the kid to be able to stay in his own room? But I said that in the current situation (he had some anxiety when separated from his mother), I found it very difficult to leave him alone. (N8-3)
how to comfort children	Question in the message area - How do you deal with emotional problems in raising two children of different ages at home? Since there was only one mother, she could not take care of them all at the same time. (N4-2) Question in the message area - I would like to ask when the child was angry, at that moment, how can you guide the child to deal with the emotion? It was usually a conflict with siblings. (N4-3)
using the application of soothing dolls or toys	Question in the message area - Did you need to encourage your children to remove soothing objects as they grew older?
dealing with disagreements between elders and parents	In fact, many elders will say: Huh? You (kid) are so old, and you still sleep with a baby's dummy in your mouth? Do you still have to look for your bear doll to sleep? I was very curious about whether this kind of thing should be given up or not, as it could soothe a child's mood and make him sleep well. (N9-2)
worry about children being abnormal	Because the child's problem had actually been discussed with me since kindergarten class, which was that my kid had difficulty concentrating and was easily affected by things around him. His condition was quite serious actually in the kindergarten class, that was the other kids could sit still, listen to the teacher's lectures or follow the activities, but my kid just touched and picked here and there, and could not sit still, so got me thinking about:

	Should I take him to be evaluated by a doctor to see if he had any hyperactivity (ADHD)? (N5-2)
worry about children's sex tendency	Question in the message area - Recently, my first boy liked to tie my hair and put a quilt on his head to feel like he had long hair. When my husband saw it, he asked me if I could stop the kid. I didn't know whether I should stop him or let him play. Was sexual orientation innate? Or could it be guided from childhood? (N7-2)
how to accompany children	We wanted to spend more time with our children. I would rather know what kind of companionship is beneficial to our children. How could we, the children and the parents, have a relatively high-quality companionship? What kind of things should we do? How could we provide such companionship? (N1-4)

4. Discussion

Regarding the content of emotional parenting resources, we knew from the responses of the text of the focus group that parental cares were mainly about practical content; for example, how to deal with their children's problems they currently encounter in life, which was what they needed most. The resource section set by the author was mainly reference materials for them to consult when necessary. Therefore, in the expert forum section of the website, parents' questions were collected and strategies for dealing with problems were provided that were the most important. This was what needed to be strengthened in the resource organization section. Even so, resources containing psychoeducational elements, such as providing positive parenting strategies, videos, and other resources, could still improve the accessibility of resources and were helpful for suitable personalized parenting interventions [3]. The availability of self-administered resources can support home-school collaboration in caring for children effectively. These are generally of low-cost and indicate little direct involvement by practitioners so self-administered resources can be used in large numbers of families in diverse contexts [14].

This study showed that parents worry about children who were shy and quiet at school, but vivid (the opposite) at home. This phenomenon was consistent with the literature showing that the significant risk for internalizing problems in young children was a shy/inhibited temperament, that made it difficult for parents to manage [15]. This study presented that raising children and holding different opinions from the child's grandparents

create more doubts and distress. This result is similar to a Chinese study that showed grandparenting styles were related to more children's emotional and behavioral problems, but in some other countries, grandparenting was found to enhance the well-being of adolescents [16].

This study also presented that parent-child interaction and communication were the main focus of parents. When parents had limited time to do something and implement their parental roles, this resulted in high levels of parenting strain [17], and this vicious cycle of increasing parental stress and behavioral problems in children might adversely affect the quality of parent-child interactions and the quality of their relationship [18]. Untreated externalizing behaviors (e.g., noncompliance, aggression) and internalizing behaviors (e.g., anxiety, depression) could lead to negative outcomes in children's development such as later mental health difficulties and reduced academic achievement [19]. The quality of parenting and parent-child interactions are linked with maintenance of these problem behaviors. For example, reduced parental warmth and sensitivity are related to increased externalizing [20] and internalizing behaviors [21].

The limitations of this study include the following finding that when discussing emotional parenting distress with parents in the focus group, related behavioral problems associated with children's emotional distress also needed to be discussed. The author used "Google meet" to discuss the disturbances with parents with the benefit being convenience, but the lack of access to some participants not being able to attend by video or

audio, merely using messages, tended to greatly limit their expression. The online resources were therefore constructed incompletely, and the subject samples were small, thereby limiting inferences gained from the research. Consequently, the research results cannot be extrapolated beyond being only suitable for working with parents of preschool children aged 3-6 years.

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