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Effects of a school based parent's role education program: Adapted from Belsky's model of determinants of parenting

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Backgrounds: Due to developmental changes in both parents and adolescent, most parents with adolescent child meet the new challenges of the parent-adolescent relationship. In this study, the parent's role education program was developed based on building healthy parents-adolescents relationships and preventing adolescent mental health problems. The school-based parent's role education program (SPREP) was constructed by Belsky's model of determinants of parenting. This model is a process model of competent parenting functioning with three domains of determinants: Personal psychological resources of parents; characteristics of the child and contextual sources of stress and support.

Purpose: This study was performed to evaluate the effects of a school-based parent's role education program (SPREP) which was developed for improvement of adolescent children parenting. SPREP consisted of understanding of self-growth and development, adolescent children understanding and so on. Also the researcher examined the relationship between adolescent parenting stress and adolescents' mental health for primary adolescent mental health care provider such as a school health nurse.

Methods: This study involved 581 parents who having middle school adolescents in grades 7 through 8 in 3 urban middle schools in South Korea for a primary survey. And their adolescent children (n=320) participated for evaluation of relationship between parenting stress and children's mental health. For evaluating the effectiveness of a school-based Parent's Role Education Program, this study employed a non equivalent control group pretest-posttest design. The study included an education (n=50) and a non-education control group (n=50) selected from two middle schools. All participants are assessed for parenting stress at pre, post and 6-month follow-up periods. Also their adolescent children (n=100) were assessed for depressive symptoms, coping responses and self-concept at pre and 6-month follow-up periods. Parenting Stress Scale devised was administered to the adolescents' parents as a measure of their parenting stress. The Reynolds adolescent depression scale was used for measurement of the subjects' adolescent children's depressive symptoms. The coping responses inventory-Youth form served to assess adolescents' coping skills. The self-concept scale was used for evaluation of adolescents' self-concept and SPREP was developed by adolescent mental health professionals and involved total 18 hour curriculums for 12 sessions. Data were analyzed using χ^2 -test, t-test, Pearson correlation coefficient and multiple linear regression and repeated measure ANOVA.

Findings: According to the results, parenting stress was strongly correlated with adolescent children's depressive symptoms (r=-0.234, p<0.001), coping responses (approach coping strategies r=0-.113, p=0.007; avoidant coping strategies r=0.072, p=0.088) and self-concept (r=-0.264, p<0.001). Parenting stress was explained 10.7% by child's self-concept (β =-0.16), parents' age (β =-0.17-0.13), child's depression (β =0.09), approach coping (β =-0.09) and experience of child's violence (β =-0.09). Lastly, there were significant differences between experimental and control groups in all study variables. SPREP was effective on parenting stress and adolescent children's mental health.

Conclusions: The results of this research may provide basic data regarding parenting stress, adolescents' depressive symptoms, coping responses and self-concept through the development of a school-based Parent's Role Education Program, encourage school health nurses to use the program for improvement of adolescent mental health as a network program of the school and the family; through the evaluation of the relationship between parenting stress and adolescents' mental health, provide a standard guideline for comprehensive adolescent mental health care including their parents.

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