#### **ABSTRACT**

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Young children's emotional competence is closely linked to their parents' attempts to socialize emotions. Emotion-related socialization behaviors (ERSBs), which includes parental discussion of, and supportive reactions to, their children's emotions represents a critical component of emotion socialization that is linked to positive social and behavioral outcomes in children. Previous research suggests that a number of poverty-related risk factors may limit parents' ability to utilize ERSBs; however, families living in poverty are not a homogenous group. The purpose of the present study was to identify factors that predicted endorsement of ERSBs among a sample of parents whose children attended Head Start. Overall, parents reported relatively high levels of endorsement of ERSBs. Parents who identified as Hispanic had higher endorsement levels than parents who identified as White or African American. Parents who reported being recently laid off from work reported the lowest levels of endorsement. Finally, a trend emerged in which parents who had higher education had lower levels of endorsement. These results illustrate the diversity of parenting practices among families living in poverty, highlighting a need for additional research regarding contributing factors to emotionsocialization practices with their preschoolers.

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# Parental Socialization of Emotions among Preschoolers in Head Start

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# TABLE OF CONTENTS

LIST OF TABLES	iv
LIST OF FIGURES	
Introduction	1
Emotional Competence	
Parental Socialization of Emotions	
Parents Living in Poverty	
Factors Related to Parental use of ERSBs	
The Present Study	7
Method	
Participants	
Measures	10
Procedure	11
Results	11
Discussion	16
Implications	18
Limitations and Future Directions	19
Conclusion	20
REFERENCES	21
APPENDICES	27
Appendix A: Items Assessing Parental Emotional Distress	
Appendix B: Items Assessing ERSBs	29

# LIST OF TABLES

Table 1.	Parent Demographic Characteristics	9
Table 2.	Means, Standard Deviations, and Bivariate Correlations for ERSB Items and Overall Psychological Distress	12
Table 3.	Results from Path Analysis (Standardized Regression Weights)	15

# LIST OF FIGURES

Figure 1.	Eisenberg et al.'s (1998) heuristic model of emotion-related socialization behaviors			
Figure 2.	Hypothesized model between predictors and ERSBs	13		
Figure 3.	Final model between predictors and ERSBs	16		

#### Introduction

Researchers, educators, and policymakers have become increasingly concerned with the development of social-emotional competence in early childhood. Social-emotional competence is crucial in early childhood because it provides some of the basic skills children need to successfully interact with others and foster healthy relationships not only in childhood, but also in adulthood (Havighurst, Wilson, Harley, Prior, & Kehoe, 2010). A critical component of social-emotional competence is emotional competence, or the knowledge, understanding, and appropriate expression of emotions (Elias, 2003). Preschool children who are more adept at recognizing and labeling emotions in others tend to have more positive interactions with teachers and peers (Miller et al., 2007), are more engaged academically, and ultimately are more successful in school (Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011). Likewise, young children who are able to appropriately express and regulate their emotions are more likely to demonstrate positive social and behavioral adjustment, both within and across time (Denham et al., 2003).

Children living in poverty, such as those attending Head Start, may be particularly at-risk for negative social and emotional outcomes, underscoring the need to understand the factors that contribute to the development of emotional competencies in this population (Fantuzzo et al., 2007; Garner, Jones, & Miner, 1994; McWayne, Owsianik, Green, & Fantuzzo, 2008; Sameroff & Fiese, 2000). Research suggests that the family context plays a vital role in the development of emotional competence in young children, as parents serve as one of the first and most important socializers of young children's emotions (Morris, Silk, Steinberg, Myers, & Robinson, 2007). Unfortunately, the majority of research in this area has focused on children from middle or upper income households. Given the additional stressors faced by parents living in poverty, it is

particularly important to investigate parental socialization of emotions among families from low-income backgrounds. Thus, the purpose of this study will be to identify factors that contribute to, or hinder, parental socialization of emotions among a sample of preschool aged children attending Head Start.

### **Emotional Competence**

Emotional competence represents a multifaceted skill set that is essential to the development of healthy interpersonal relationships across the lifespan (Saarni, 1999). Several facets of emotional competence have been studied, with the majority focusing on three key areas: (1) emotion knowledge, or the ability to understand other's emotions based on environmental cues; (2) emotion expression, or the tendency to express more positive than negative emotions; and (3) emotion regulation, the ability to moderate the intensity and duration of emotions (Denham et al., 2003). The preschool years are a critical period for the development of these skills, as the competencies children gain during the preschool years serve as a foundation in which they will develop and build competencies as they continue to grow (Fantuzzo et al., 2007). Emotional competence is crucial because the child is able to respond to situations emotionally, while applying their knowledge and experiences to various social situations to successfully navigate social interactions with others (Denham et al., 2003; Saarni, 1990). In turn, self-regulation and prosocial behavior has been linked with mathematical and literacy development, not only in preschool, but also in the later years of school (Fantuzzo et al., 2007).

#### **Parental Socialization of Emotion**

Children's emotional competence is closely linked to their parents' attempts to socialize emotions. Eisenberg and colleagues (1998) referred to these attempts as emotion-related socialization behaviors (ERSBs; Eisenberg, Cumberland, & Spinrad, 1998). ERSBs encompass a

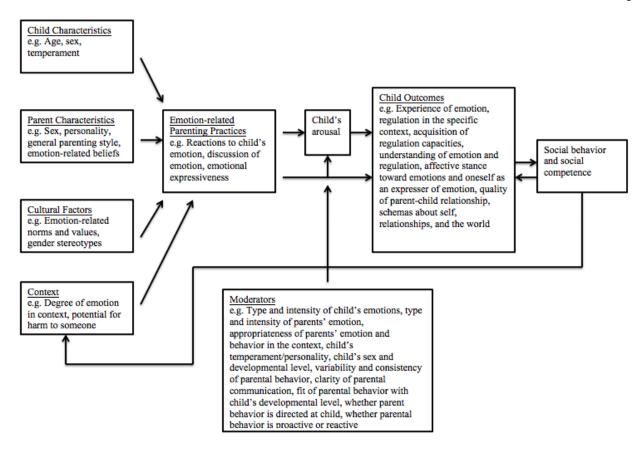
wide range of parental attitudes and behaviors that are relevant to children's social-emotional development (Brophy-Herb, Stansbury, Bocknek, & Horodynski, 2012). These include, but are not limited to, the ways in which parents express and model emotions, parental reactions to their children's emotions, and active attempts to discuss emotions through labeling and explaining their causes and effects (Denham, Mitchell-Copeland, Strandberg, Auerbach, & Blair, 1997; Eisenberg et al., 1998; Havighurst et al., 2010). A wealth of research has demonstrated links between a wide range of ERSBs and positive social and behavioral outcomes in children, including fewer problem behaviors (Hooper, Feng, Christian, & Slesnick, 2015), increased prosocial behavior (Padilla-Walker, 2014), and greater self-regulation of emotion and behavior (Garner, Dunsmore, & Southam-Gerrow, 2008).

### **Parents Living in Poverty**

Due to financial concerns, parents living in poverty have additional stressors that parents from higher income households may not have (Garner et al., 1994). Poverty-related stressors can adversely affect the home environment and the parents' mental health, which in turn, limits parents' ability to teach their children optimally in the realm of emotional development (McWayne et al., 2008). Within low-income households there may be fewer opportunities for positive interactions among family members, thus giving parents fewer opportunities to model positive emotions for their children (Miller & Olson, 2000). Moreover, poverty-related stressors may increase the likelihood that parents will engage in harsh and punitive parenting practices, rather than taking time to talk about emotions with their children (Pinderhouse, Dodge, Zelli, Bates, & Pettit, 2000). Finally, parents living in poverty are more likely to experience psychological distress, including depression, than economically advantaged parents (Patterson & Albers, 2001). Parental depression can also have an adverse effect on children's social-emotional

competence. Findings show that children of mothers with depression may have more difficulty in areas of emotion-regulation and positive mood because the mothers have difficulty regulating their own emotions (Feng et al., 2008). The mothers may not be modeling positive emotion-regulation practices to their children, so they may not know what positive emotion-regulation looks like. Parents experiencing depression might also affect their children's emotion-regulation through their immediate responses to their child's behavior and expression of emotion, as parents experiencing depression are less likely to react when their child shows feelings of distress (Feng et al., 2008).

Despite these trends, parents living in poverty do not represent a homogenous group. Indeed, research findings have noted significant variability in the use of ERSBs among parents living in poverty, with many engaging in supportive parenting practices, including ERSBs (Brophy-Herb et al., 2012). These findings underscore the need to examine factors that serve to enhance or hinder the use of ERSBs within this population of parents. Eisenberg et al. (1998) proposed a conceptual model to describe the processes involved in the development and outcomes of parental ERSBs (see Figure 1). In the present study, we focus on the first part of this model to explore factors related to the use of ERSBs in a sample of parents and children living in poverty.



**Figure 1**. Eisenberg et al.'s (1998) heuristic model of emotion-related socialization behaviors.

### **Factors Related to Parental use of ERSBs**

According to Eisenberg et al. (1998), child characteristics, parent characteristics, cultural factors, and contextual factors all play a role in the extent to which parents engage in ERSBs. Child characteristics include traits such as age, gender, and temperament, and wield influence over the use of ERSBs through the response they provoke from the parent. For example, parents report encouraging different methods of coping with emotions based on the child's gender (Eisenberg et al., 1998; Van der Pol et al., 2015). Parents may try to employ distraction techniques when their son is sad, whereas they may be more inclined to allow their daughter to outwardly express emotions of sadness. Likewise, when discussing emotions with their children,

many parents tend to focus more on positive emotions (e.g. happiness) with their daughters and negative emotions (e.g. anger) with their sons.

Parent characteristics include personal traits such as parenting style and their own socialemotional competence, which affect the level of emotional support parents are able to offer to
their children. In general, children of parents who demonstrate a warm and attentive parenting
style tend to feel more emotionally positive (Berk, 2012) whereas parents who have difficulties
regulating their own emotions are less likely to be able to effectively support their children's
emotional competence (Feng et al., 2008). Psychological distress represents a parent-level risk
factor that may limit parents' ability to engage in ERSBs with their children. It is possible that
parents with depression might serve as withdrawn and passive social models to their children,
and the children are imitating that behavior whether they themselves are depressed or not
(Downey & Coyne, 1990; Feng et al., 2008; Goodman & Gotlib, 1999).

Cultural factors include characteristics of the geographic area and community in which the parent and child live, the ethnicity of the parent and child, and any other cultural norms including appropriate expressions of emotions. Individualistic cultures, such as those typically found among Western cultures, tend to value autonomy and assertive social skills, and the lack of social engagement and initiation is seen as maladaptive (Chen & French, 2008; Rubin, Burgess, & Coplan, 2002; Triandis, 1995). Conversely, individuals from collectivist cultures, such as Asian and Latin American cultures, may not value social initiative behaviors because it may be seen as intrusive and not conducive for the well-being of the group as a whole (Chen & French, 2008; Tamis-LeMonda et al., 2007; Triandis, 1995). Individualistic cultures tend to encourage children to express and make their emotions known to others, whereas in collectivist

cultures children are generally encouraged not to express emotions and to keep emotions to themselves (Chen & French, 2008; Edwards, 2000; Farver, Kim, & Lee, 1995).

Finally, contextual factors represent the circumstances and situations surrounding the family context (i.e., marital status, employment status, and education level). These factors can also contribute to how parents interact with their children. For example, a parent's education level can contribute to parents' knowledge about their child's development.

## **The Present Study**

The majority of research on parental socialization of emotion to date has been conducted using participants from middle-income families, while considerably less has focused on parents and children living in poverty. Given the inherent risks associated with poverty to both parents and children, it is critical to identify factors that promote or hinder the endorsement of ERSBs in this population. Thus, the purpose of the present study was to examine the factors that contribute to parents' use of ERSBs with their young children attending Head Start. Two primary research questions was explored in this population: (1) To what extent do parents of children in Head Start endorse the use of ERSBs, and (2) does use of ERSBs vary as a function of child characteristics (i.e., child gender), parent characteristics (i.e., levels of psychological distress), cultural characteristics (i.e., parental ethnicity), or contextual factors (i.e., parent education level, employment status, marital status)?

#### Method

This study was approved by the Institutional Review Board (IRB) of North Carolina State University. Data for the present study were drawn from Head Start CARES. The purpose of the Head Start CARES project was to examine the impact of three interventions (i.e., Incredible Years Teacher Training Program, Preschool PATHS, and Tools of the Mind) for improving

social-emotional skills in preschool aged children. Participants came from 17 Head Start centers across four U.S. regions (i.e., four from the Northeast, four from the West, three from the South, and six from the Midwest/Plains states). Each center was chosen to reflect the geographic, racial, and ethnic diversity of the national Head Start population.

## **Participants**

A total of 3,949 children participated in the Head Start CARES program. For the present study, data were utilized from four-year-old children, as parent surveys were only administered to parents of four-year-olds. This sample included 1,846 parents of 2,670 four-year-old children enrolled in one of the 307 Head Start classrooms participating in the CARES program. Parents were surveyed in two cohorts, one during the fall, and the other during the spring. For the purposes of this study, only data from the fall cohort of parents were examined, due to the emotion-related parenting variables being taken out of the spring survey. The 532 participants in the fall cohort were parents from four states in the northeastern United States. Table 1 presents full demographic information for this sample. A total of 26.3% identified themselves as White, 33.8% as African American, 25.9% Hispanic, and 11.5% as another race. Education level ranged from less than a high school degree (23.1%) to higher education (30.2%), with the majority of parents having obtained a GED or high school diploma with no further education (45.3%). Finally, 51.1% of parents had a son attending Head Start and 49.9% had a daughter.

 Table 1. Parent demographic characteristics.

Variable	<i>N</i> = 532				
Child Gender					
Female	260				
Parent Ethnicity					
White	140				
African American	186				
Hispanic	138				
Parent Marital Status					
Married	155				
Single	207				
Divorced	65				
Living with Partner	96				
Parent Employment Status					
Employed	283				
Unemployed	221				
On Leave	4				
Laid Off	18				
Parent Education Level					
No High School Diploma or G. E. D.	122				
High School Diploma or G. E. D.	243				
Higher Education	161				

#### Measures

All data were derived from a parent survey created for purposes of the Head Start CARES research project. The survey consisted of 126 items and included questions about the parents'/caregivers' demographic characteristics (e.g., ethnicity, employment status, and emotional state), and their child's behavior and temperament.

Parental psychological distress was measured via six items (see Appendix A) taken from the K-6 Kessler Psychosocial Distress Scale (Kessler, et al., 2002). Each item listed a symptom related to psychological distress. For each item, parents were asked to think of the past 30 days and report the frequency with which they experienced each symptom on a scale ranging from 1 (none of the time) to 5 (all of the time).

Emotion-related socializing behaviors (ERSBs) were measured via 10 items from the Emotion-Related Parenting Style Self-Test Likert (Hakim-Larson, Parker, Lee, Goodwin, & Voelker, 2006). The original scale consists of 81 items designed to assess four parenting styles (i.e., emotion coaching, laissez-faire, dismissing, and disapproving). In the present study, only items from the emotion coaching subscale were reported ( $\alpha = 0.76$ ) due to low reliability coefficients for items on the dismissing ( $\alpha = 0.23$ ) and disapproving ( $\alpha = 0.36$ ) subscales. For each of the five emotion coaching items (e.g. When my child gets sad, I try to help him/her figure out why the feeling is there; When my child is angry, it's time to solve a problem; See Appendix B), parents responded on a scale ranging from 1 (never true) to 5 (always true).

Finally, parents reported their ethnicity, education level, employment status, and marital status in a free response format which was later coded in the final dataset by the original researchers. In the preset study, education was further collapsed into three categories: less than high school, high school diploma or GED, and higher education.

### **Procedure**

Parents of four-year-olds enrolled in Head Start programs participating in the Head Start CARES project completed a survey over the phone. Consent forms were given to parents during the spring before the implementation year. Parents were told that they would be answering some questions about themselves and their child and that the data would be used to understand the impact of the interventions (Incredible Years Teacher Training Program, Preschool PATHS, and Tools of the Mind) on children enrolled in Head Start centers in the CARES program. Parents were also assured that their participation was completely voluntary and that they may, without penalty, skip any questions they did not want to answer.

#### Results

Descriptive statistics including means, standard deviations, and bivariate correlations for each of the items measuring use of ERSBs, as well as overall scores for psychological distress, are presented in Table 2. Overall, parents reported a high level of endorsement of ERSBs (M = 4.58, SD = 0.55), with mean item responses ranging from 4.39 (item 4, "When my child is angry, it's time to solve a problem") to 4.76 (item 5, "It's important to help him/her find out what caused the child's anger"). Bivariate correlations between each of the ERSB items were statistically significant (p < .01) and positive, ranging from .27 to .70. Psychological distress scores ranged from 1.00 to 4.67 with an overall low mean score for the sample (M =1.51, SD = 0.57). Correlations between overall psychological distress scores and each of the ERSB items were nonsignificant, ranging from -.04 to .06.

**Table 2.** Means, Standard Deviations, and Bivariate Correlations for ERSB Items and Overall Psychological Distress.

	1	2	3	4	5	M	SD
1. When my child is sad, I try to help him/her explore what is making him/her sad.	-					4.59	0.74
2. When my child is sad, we sit down to talk over the sadness.	0.51**	-				4.55	0.76
3. When my child is sad, I try to help him/her figure out why the feeling is there.	0.50**	0.70**	-			4.61	0.73
4. When my child is angry, it's time to solve a problem.	0.27**	0.30**	0.34**	-		4.39	0.98
5. It's important to help him/her find out what caused the child's anger.	0.39**	0.39**	0.43**	0.37**	-	4.76	0.56
Psychological Distress	-0.01	-0.02	-0.04	0.06	0.03	1.51	0.57

Note. \*\*p < 0.01

We conducted structural equation modeling using AMOS version 23 to simultaneously test the effects of each predictor on an ERSB latent factor. The hypothesized model is presented in Figure 2. Each ordinal predictor (i.e., ethnicity, marital status, education, and employment status) was recoded to create k-1 variables, where k represents the number of ordered categories within each predictor. The value of each new variable was set to 1 if a case was in a given category, and set to 0 otherwise. One category per predictor served as a reference group from which comparisons were made, and was thus left out of the model ('White' for ethnicity, 'employed' for employment status, 'less than high school' for education level, and 'married' for marital status).

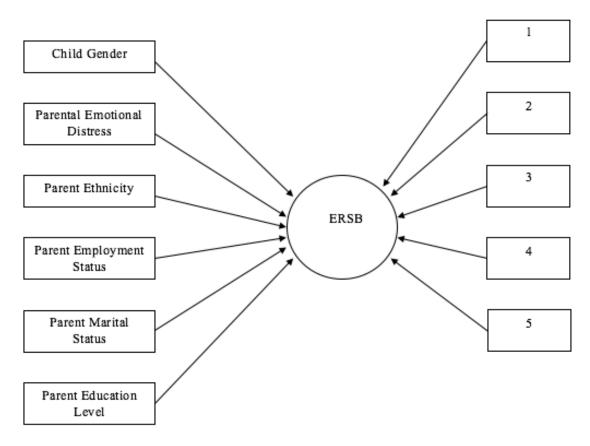


Figure 2. Hypothesized model between predictors and ERSBs.

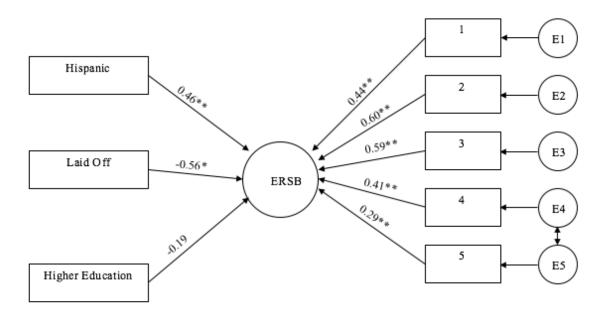
The fit of the measurement model, consisting only of the ERSB latent factor, was first assessed using the following fit criteria: a CFI  $\geq$  .90, and RMSEA  $\leq$  .07 (Browne & Cudeck, 1993; Bentler, 1990). This model fit the data well, although failed to meet with the a priori RMSEA cutoff value,  $\chi^2$  (5) = 33.83, p < .001, CFI = .96, RMSEA = .10. After examination of modification indices to improve model fit, the error terms between ERSB items 4 ("When my child is angry, it's time to solve a problem") and 5 ("It's important to help him/her find out what caused the child's anger") were allowed to correlate. This resulted in excellent fit,  $\chi^2$  (5) = 10.60, p = .03, CFI = .99, RMSEA = .06. Factor loadings ranged from .40 - .84, and all were statistically significant (p < .001).

This ERSB latent factor was next regressed onto child gender, marital status, employment status, education, psychological distress, and ethnicity (see Table 3). Several predictors were nonsignificant including child gender, marital status, education, and psychological distress, and were subsequently removed from the model. Only ethnicity and employment status were statistically significant predictors of the ERSB latent factor (see Figure 3). Specifically, compared to White parents, Hispanic parents reported greater endorsement of ERSBs (b = .20, SE = .06, p < .001). Moreover, compared to parents that were working, parents who reported that they were laid off reported lower endorsement of ERSBs (b = -.10, SE = .05, p = .03). Surprisingly, there was a negative trend for higher education, suggesting that parents who attended at least some college or received a college degree were less likely to endorse ERSBs; however, this did not reach the level of statistical significance (b = -.08, SE = .05, p = .079).

 Table 3. Results from Path Analysis (Standardized Regression Weights).

Variable	b	SE	p		
Female	0.03	0.05	0.516		
Education					
<b>Higher Education</b>	-0.10	0.05	0.057		
High School or Equivalent	-0.00	0.05	0.968		
Ethnicity					
African American	-0.00	0.05	0.989		
Hispanic	0.23	0.05	0.000		
Other	-0.07	0.08	0.345		
Employment Status					
On Leave	0.31	0.27	0.249		
Unemployed	-0.03	0.05	0.571		
Laid Off	-0.29	0.13	0.026		
Not Working	-0.00	0.14	0.989		
Marital Status					
Single	0.03	0.05	0.565		
Divorced	0.02	0.07	0.737		
Living with Partner	0.08	0.06	0.214		

Note. Statistically significant results are in bold.



**Figure 3**. Final model between predictors and ERSBs.

### **Discussion**

Parents serve as one of the first and most important socializers of young children's emotions. Previous research suggests that parents living in poverty may have fewer opportunities for positive interactions and modeling positive emotions for their children (Miller & Olson, 2000). However, parents living in poverty are not a homogenous population, underscoring the need to understand the factors that promote or hinder endorsement of ERSBs among parents living in poverty. The purpose of this study was to examine (1) the extent to which parents of children in Head Start use ERSBs, and (2) the specific factors related to ERSB endorsement within this population.

In regards to the first research question, parents in the present sample reported a relatively high level of endorsement of ERSBs. Prior research suggests that parents living in poverty tend to be less nurturing and responsive to the social-emotional needs of their children (Conger, McCarty, Yang, Lahey, & Kropp, 1984); however, other studies have found that parents of children enrolled in Head Start are just as capable and active as middle-class parents in

engaging in ERSBs with their children (Brophy-Herb et al., 2012; Garner et al., 1994). The present findings further support the notion that many parents living in poverty engage in supportive parenting practices with their children, and that Head Start and Early Head Start may serve as protective factors for parents, possibly due to the parent education the programs can provide.

Analyses examining the effects of child characteristics on ERSB endorsement revealed that parental endorsement of ERSBs did not vary as a function of child gender. This is somewhat inconsistent with prior research suggesting that parents utilize different techniques to teach their children emotion-regulation practices based on their child's gender (Van der Pol et al., 2015; Eisenberg et al., 1998). For example, due to cultural gender stereotypes, parents may encourage their daughters to openly express their emotions, whereas parents may discourage their sons from showing their emotions, particularly sadness. Parents have also been found to tolerate expression of anger in their sons more so than in their daughters (Van der Pol et al., 2015). However, we found that parents had high endorsement levels of ERSBs, regardless if they had a son or a daughter.

In terms of parent characteristics, a surprising finding was that overall psychological distress did not have an effect on ERSB endorsement levels. Poverty-related stressors, such as living in a dangerous area and insecure housing, often result in higher levels of psychological distress, which in turn may limit parents' ability to engage in ERSBs with their children (Feng et al., 2008, Garner et al., 1994; Pinderhouse et al., 2000). In the present study, parents reported low levels of psychological distress, which may have limited the ability to detect a relationship between distress and ERSB endorsement.

Parent ethnicity emerged as a significant cultural-level predictor of ERSB endorsement. In comparison to White parents, Hispanic parents reported greater endorsement of ERSBs.

Although there is a dearth of research examining cultural differences in parents' emotion socialization practices, those identifying with a collectivist culture, such as Hispanic, tend to encourage their children to keep their emotions to themselves because it may not necessarily be beneficial to the group as a whole (Chen & French, 2008; Tamis-LeMonda et al., 2007; Triandis, 1995). However, as a result of cultural shifts in the Hispanic community due to immigration to the United States, and more children of Hispanic immigrants becoming parents themselves, parents' views on how to effectively teach their children how to interact with others, particularly their elders and those in authority, may be changing (Calzada, Fernandez, & Cortes, 2010).

In terms of contextual factors, only employment status emerged as a statistically significant predictor of parental endorsement of ERSBs. Parents who reported that they were recently laid off from work had lower endorsement levels of ERSBs when compared to working parents. Being laid off represents a typically unexpected and involuntary loss of income. This negative financial event is likely to be particularly detrimental to families that are already experiencing economic hardship, resulting in conflictual parent-child relationships (Landers-Potts et al., 2015). In turn, the negative emotions that arise as a result of these conflicts may adversely affect parenting practices such as parental warmth (Krishnakumar & Buehler, 2000).

## **Implications**

The findings of this study add to a growing body of research on parent socialization of emotion among families living in poverty. Importantly, the findings provide additional evidence of the intergroup variability that exists among parents living in poverty. The majority of parents in the present sample reported that they endorsed using positive strategies to support their

children's emotional development. In practice, it is important to keep this intergroup variability in mind because risk and protective factors can vary across families and communities.

The present findings also identify some potential risk and protective factors associated with parents' socialization of their children's emotions. Hispanic parents tended to have higher endorsement levels of ERSBs than any other ethnic group. Head Start centers with a large Hispanic population can promote different interventions and programs that encourage parents to continue using ERSBs with their children, and centers with a low Hispanic population can put interventions and programs in place to teach parents about the importance of ERSBs and how to use them. There should also be additional supports in place for parents experiencing job instability, helping them to manage stress and to continue using ERSBs with their children despite stress. Further research needs to be done to assess what each unique community might need in order to inform stakeholders and administration of how to best allocate funds and resources.

### **Limitations and Future Directions**

The results of this study must be interpreted in light of some limitations. First, although the parents surveyed were representative of the Head Start population in various ways, the parents participating were most likely parents who were already positively involved in their children's lives to begin with. These parents may have been more likely to respond to the survey and prioritize participating in the study. This survey was also only given to parents in the Northeastern United States, which may limit the generalizability of the results to parents in other geographical regions. A second limitation is the use of only five items to assess ERSBs.

Although these items demonstrated adequate psychometric properties, the original scale from which these items were drawn likely provides a more comprehensive measure of ERSBs,

including practices that correspond to disapproving, dismissing, and laissez-faire parenting styles. Finally, the lack of variability in psychological distress scores among the present sample limited our ability to compare ERSB endorsement levels among parents with higher and lower levels of psychological distress.

Future studies should also consider comparing ERSB endorsement levels across mothers and fathers, as the vast majority of parents who responded to this survey were mothers. A big question taken away from this study is if Head Start is not only a protective factor for children, but if it is also a protective factor for parents, and if so, how. These parents had a high ERSB average score, so it raises the question if Head Start is providing something for these parents that other parents living in poverty do not have.

### **Conclusion**

The present study expands on our understanding of parents living in poverty and their endorsement of ERSBs with their preschool children. The findings further speak to the variability that exists among parents living in poverty, indicating that poverty is simply one component contributing to parental endorsement of ERSBs. Each family has a different combination of risk and protective factors that are unique to that specific family, so these families cannot be classified as a homogenous population. The findings of this study can contribute to further research regarding contextual factors and ERSBs and the effect Head Start can have on parental ERSB endorsement.

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# **APPENDICES**

# Appendix A:

# Items Assessing Parental Emotional Distress

The following questions ask about how you have been feeling during the past 30 days. For each question, please tell us the answer that best describes how often you had this feeling.

# 19. During the past 30 days, about how often did you feel...

	None of the Time	A Little of the Time	Some of the Time	Most of the Time	All of the Time
a. Nervous?	1	2	3	4	5
b. Hopeless?	1	2	3	4	5
c. Restless or fidgety?	1	2	3	4	5
d. So depressed that nothing could cheer you up?	1	2	3	4	5
e. That everything was an effort?	1	2	3	4	5
f. Worthless	1	2	3	4	5

## **Appendix B:**

## Items Assessing ERSBs

In this section, you will be asked some questions about your experiences with [CHILD] and your views on parenting styles.

For the following statements, please tell me how true you feel each one is (read categories):

- 1 = never true
- 2 = rarely true
- 3 = not sure
- 4 = sometimes true
- 5 = always true
- DK = don't know
- R = refused
- 1. When my child is sad, I try to help him/her explore what is making him/her sad.
- 2. When my child is sad, we sit down to talk over the sadness.
- 3. When my child is sad, I try to help him/her figure out why the feeling is there.
- 4. When my child is angry, it's time to solve a problem.
- 5. It's important to help him/her find out what caused the child's anger.