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Walden University

College of Social and Behavioral Sciences

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Melanie Ballardo Rodriguez

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> Chief Academic Officer Eric Riedel, Ph.D.

> > Walden University 2019

Abstract

Parental Behaviors of Mothers in Low Socioeconomic Hispanic Families

by

Melanie Ballardo Rodriguez

MEd, University of Texas Rio Grande Valley, 2009 BA, University of Texas Rio Grande Valley, 2003

Dissertation Submitted in Partial Fulfillment of the Requirements for the Degree of Doctor of Philosophy

General Psychology

Walden University

November 2019

Abstract

Parental functioning and behaviors in the family impact the outcomes of adolescents; however, few researchers have identified how age-specific parental behaviors and parental stressors impact young children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11. Based on the family stress model, the purpose of this quantitative correlational study was to examine the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and parental stress on children's social-emotional problems (internalizing and externalizing behavior problems), and the mediating effect of parental behaviors in low socioeconomic Hispanic families with children ages 6-11. A sample of 63 low socioeconomic, Hispanic mothers self-reported their perceived stress, parent-child relationship, and child's behavioral and emotional problems. The data were coded and grouped into 4 path analysis models based on the Pearson r correlation analysis, which indicated a significant relationship between parental behaviors and parental stress on children's externalizing behavior problems. The path analysis indicated that parental behaviors did not mediate the relationship between parental stress and children's externalizing behavior problems. The findings from this study have the potential to benefit low socioeconomic Hispanic families and their young children by improving the quality of parenting and developing and/or improving more targeted and relevant interventions for parent support, potentially leading to an overall community improvement of parent-child relationship and child outcomes.

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Dedication

This is dedicated to my mom, Mary Lou, you are my inspiration, I am strong because of your example. To my husband, Richard, who has shown me support, patience, and love through this long journey. You listened to my pangs of worry and pushed me when I wanted to give up. I cannot thank you enough, you are my sunshine!

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Chapter 1: Introduction to the Study

Parenting is a challenging process for most people, regardless of socioeconomic status (SES). Effective parenting can impact the ability of young children to develop social skills, succeed academically, and foster positive interpersonal relationships (Hartas, 2011; Leidy, Guerra, & Toro, 2012; Nievar, Moske, Johnson, & Chen, 2014). Society, which is grounded within the family and is the smallest social unit, relies on parenting to nurture children according to the virtues of that society. Positive or negative parental behaviors demonstrated by parents have a social impact within the culture and on society (Emmen et al., 2013; Gonzales et al., 2011; Leidy et al., 2012; Mesman, van IJzendoorn, & Bakermans-Kranenburg, 2012; Sameroff, 2010).

Parental functioning and behaviors in the family impact how children develop from an early age (Blair & Raver, 2012; Conger, Conger, & Martin, 2010; Huang, Sherraden, Kim, & Clancy, 2014; Leidy et al., 2012; Neece, Green, & Baker, 2012; Odgers et al., 2012; Puff & Renk, 2014; Roberts, Campbell, Ferguson, & Crusto, 2013). In homes in which both parents are present, economic challenges are infrequent, and parental stress is low, children have a better chance of meeting developmental and social milestones (Puff & Renk, 2014). The Hispanic population are more likely to experience adverse social conditions of poverty, such as a higher rate of single-parent households, poor access to mental and health care, and inadequate housing (Lopez, 2015). These social conditions exacerbate the family stresses that jeopardize the healthy development of adults and children (Conger & Donnellan, 2007). Children who have high levels of parental stress in their lives can develop maladaptive behaviors, including mood disturbances, emotional disorders, and attention deficits (Puff & Renk, 2014). Situational and life stressors in the lives of parents can impact the development and long-term functioning of children (Puff & Renk, 2014).

In the last several decades, researchers have confirmed the negative impact of poverty on children and families. However, these findings are not distributed across all ethnic and racial groups. Hispanics are the largest growing ethnic group in the United States (Lopez, 2015), have the highest rate of children in poverty under the age of 18 (Krogstad, 2014), and have the highest rate of mothers as the primary or sole caregiver in Hispanic families (Broussard, Joseph, & Thompson, 2012). The increase of Hispanic population and high rate of mothers as primary or sole caregivers in Hispanic families brings change to U.S. demographics in that it increases the demands for adequate interventions and services that focus on the ethnic group (Broussard et al., 2012; Cancian & Haskins, 2014; Lopez, 2015). The Hispanic population does not always seek the kinds of services that other populations readily use, such as mental health services (i.e., therapy) and social services supports (i.e., parent education programs; Ayón, 2011; Lopez, 2015); they often fear or have no experience seeking out public services or are burdened by family obligation, stigma, and loyalty (i.e., the responsibility falls on the family and excludes outsiders or the perceived stigma and attitudes from family and friends; Ayón, 2011; Stein, Gonzalez, Cupito, Kiang, & Supple, 2015; Turner, Jensen-Doss, & Heffer, 2015). The available services and interventions lack cultural diversity; therefore, many families avoid seeking or finding services that are helpful (Lopez, 2015). This presents an economic, ethical, public, and social burden. An improved understanding of how age-specific developmental influences of parental behaviors and parental stressors impact children's socioemotional problems within low socioeconomic

Hispanic families was essential to enhance the quality of parenting services and intervention prospects and to affect positive social change.

In Chapter 1, I outline the overall problem, including the background to the problem, a problem statement, a research-supported statement of the purpose of the study, and existing research on the issue of the relationship of low SES for Hispanic children. In the background information, I reflect on the connection between SES and parental functioning and related SES factors to developmental issues in a population. I identify the gap that existed in research that was the foundation for additional study on the issue. The research questions and corresponding hypotheses drove the research process and provided the structure for integrating existing research with a methodological approach that promoted an understanding of the issue and its impacts. The theoretical framework included Conger, Conger, and Edler's (1997) family stress model, the theoretical base for evaluating the research. In the nature of the study, I present a rationale for the selection of the study design and a brief description of the study variables. The central terms used for the study are defined in this chapter, as well as the assumptions, limitations, generalizability, and delimitations. The significance of the study includes the potential contributions and implications of the study.

Background

In 2014, about 20% of children in school between the ages of 5 and 17 were living in poverty, with significant variations in both numbers and demographic features based on region (Kena et al., 2015). This amounted to approximately 10.9 million children being raised in socioeconomically disadvantaged families, an increase of more than four percentage points from 1990 (Kena et al., 2015). Kena et al. also noted that some of the states hardest hit by childhood poverty were those with larger than average Hispanic populations, including states like Arizona, California, Florida, New Mexico, New York, and Texas. Hispanic children comprised 32% of the total population of children living in poverty (Kena et al., 2015). Poverty and family status both influence the long-term outcomes for these children, including their ability to excel in education, their capacity for developing stable relationships, and their long-term productivity (Kena et al., 2015; Mulligan, Hastedt, & McCarroll, 2012; Schady et al., 2015).

Conger et al. (2010) maintained that low SES families often experience high levels of stress, specifically for Black and Hispanic families. A significant number of studies were focused on the development of adolescents, maintaining that children raised in low SES homes experience parental stressors that can impact the parenting process, including diminishing parental focus on effective parenting and reducing the chances that parents remain in spousal relationships (Carlo, Mestre, Samper, Tur, & Armenta, 2010; Carlo, Padilla-Walker, & Day, 2011; Conger & Conger, 2002; Conger et al., 2010; Gonzales et al., 2011; Lee, Lee, & August, 2011; Leidy et al., 2012; White, Liu, Nair, & Tein, 2015).

For Hispanic families, especially with young children, the developmental influences of this kind of familial dissolution and instability can be felt acutely (Gonzales et al., 2011; Leidy et al., 2012; Weis & Toolis, 2010). Although parenting is one of the most significant factors influencing early child development, many Hispanic children live in single-family homes where low SES is associated with poor parental behaviors and low levels of motivation towards social, emotional, and academic success. There is a shift in the family composition and childrearing in that "family boundaries are no longer maintained, customary roles and tasks are no longer performed, and family members are no longer functioning at optimal physical or psychological levels'' (Price, Bush, & Price, 2015, p. 13). The ability of parents to maintain stable, two-parent families and to develop effective parenting skills influences outcomes for children. Poverty is not the sole indicator of poor outcomes for children, especially for Hispanic children. Marriage rates are declining, and the rate of nonmarital births are increasing (Cancian & Haskins, 2014). Lichter, Sanders, and Johnson (2015) maintained that rates of Hispanic fertility has increased at the same time that the economic status of Hispanic mothers has decreased, even with the increase of Hispanic working mothers (Cancian & Haskins, 2014). There is a higher rate of nonmartial or teen childbearing, low educational attainment, poor language skills, and poor levels of occupational attainment that have increased the problem of poverty for children (Lichter et al., 2015).

Broussard et al. (2012) and Lichter et al. (2015) argued that Hispanic mothers are experiencing a high level of poverty even when employed, and they are more likely to be the person parenting their children. More than 42% of mothers are raising their children in poverty, and 50.3% are living below the poverty line (Broussard et al., 2012). Compared to their counterparts, 32.7% of White mothers and 47.1% of Black mothers are living below the poverty line (Broussard et al., 2012). Mothers are 10 times more likely than fathers to be the primary or sole care provider for children regardless of their SES or race/ethnicity (Broussard et al., 2012). Mothers are more likely to experience the social and economic stresses related to providing care for children. Broussard et al. maintained that mothers, even working mothers, living in poverty experience significant levels of stress that could hinder their effective parenting. Hispanic mothers are at a high risk of experiencing emotional and physical stress related to parenting. Broussard et al. indicated that mothers are carrying a larger percentage of the responsibility of caring for their children and the emotional and physical stress caused by that role. In the past, perceptions of resilience reflected the benefits of extended families in supporting childrearing parent families. Extended families are no longer functioning as optimal support mechanisms, and many mothers are going without basic needs to care for their children. Subsequently, poverty-related stress and the daily stresses related to motherhood are compounded (Broussard et al., 2012).

Ethnic and social variables play a role in the parenting process (Bernier, Carlson, Deschênes, & Matte-Gagné, 2012; Manuel, Martinsons, Bledsoe-Mansori, & Bellamy, 2012). There was a social problem that could be addressed to improve outcomes for young children, but there was a lack of understanding of how to address this populationspecific problem.

Researchers have examined the impact of economic difficulties and negative parental behaviors on the outcome of adolescents, which may be useful in understanding the outcomes of young children. Few researchers who focused on parental behaviors and parental stress and their impact on child development have viewed the outcomes at different ages. For example, Huang et al. (2014) determined that children from low income homes, specifically at age 4, were at a greater risk for being influenced by parental attitudes and behaviors and developing negative child outcomes. Huang et al. concluded that child developmental programs could be used in conjunction with other health and early interventions to improve the social-emotional development during early childhood. An effective response needs to be created to address the needs of young Hispanic children who are socially economic disadvantaged and underperforming. Many Hispanic parents are not seeking support that could benefit their family (Ayón, 2011; Lopez, 2015; Stein et al., 2015; Turner et al., 2015). Hispanic families prefer to address their issues internally rather than seek social support that could improve the stability of their family (Ayón, 2011; Lopez et al., 2015). Hispanics were much less likely to seek social support than White populations (Turner et al., 2015). Ethnic and racial diversity play roles in how children develop in low SES families, just as much as their parental behaviors and parental stress.

Although researchers have related the disruption of the family processes to SES, such factors as material hardship (Kang, 2013), home environment (Gridley, Hutchings, & Baker-Henningham, 2013; Rijlaarsdam et al., 2013), neighborhood economic disadvantage (Gonzales et al., 2011), psychological distress (Manuel et al., 2012; Rijlaarsdam et al., 2013), and maternal warmth (Benner & Su Yeong, 2010; Chen, Miller, Kobor, & Cole, 2011), most researchers also related disruption to a lack of social support (Kang, 2013; Lee et al., 2011; Manuel et al., 2012). Scholars have focused on the mechanisms that shape parental behaviors in Black and White families that influence adolescent outcomes. Few researchers have identified age-specific mechanisms for providing support to improve the quality of parenting and outcomes for at-risk children in low socioeconomic Hispanic families with children ages 6-11.

Addressing the needs of Hispanic families could enhance parental quality to improve the parent-child relationships and child outcomes. Such understanding is important because it not only provides opportunities to comprehend the underlying processes operating on these relationships, but it also aids parents, policy makers, intuitions, communities, mental health and health providers, and educators to meet the needs of at-risk Hispanic families (Lee et al., 2011; Lopez, 2015; Slack et al., 2011).

Problem Statement

A lack of effective parenting in at-risk populations, including low SES Hispanic families, can have impacts across the lifespan (Weis & Toolis, 2010). White et al. (2015) found that parenting and family stress pose threats to the functional developmental process with lasting impacts. There is a connection between poverty and problematic developmental impacts in childhood, including emotional and behavioral challenges and the potential for developing mental, emotional, and behavioral conditions (Yoshikawa, Aber, & Beardslee, 2012). The potential for cycles of poverty in at-risk populations has been noted by Yoshikawa et al. (2012) and Zeiders, Roosa, and Tein (2011). Low SES can result in poor outcomes for child development and family processing by impacting the ability of parents to respond to the needs of their children. Disruptive elements, including the impacts of economic stress and marital distress, can influence a child's perspective on family, social, and emotional ties. Material hardship, including economic, food, and shelter insecurity, can result in maladaptive behaviors that follow a child in early life (Gridley et al., 2013; Kang, 2013; Manuel et al., 2012; Reising et al., 2013; Rijlaarsdam et al., 2013).

A connection between SES, particularly between "material and psychosocial context of poverty" (Blair & Raver, 2012, p. 310), and adolescent development have been detailed in the literature, such as parenting styles (e.g., maternal warmth, harsh parenting), parent-child relationship, marital relationship, disadvantage neighborhoods

(e.g., higher crime rates and unemployment levels, housing conditions), brain development, social support, family processes (e.g., marital/family conflict, supportive parenting, familism cultural values, acculturation), and parental distress (Carlo et al., 2010; Carlo et al., 2011; Conger & Conger, 2002; Gonzales et al., 2011; Hair, Hanson, Wolfe, & Pollak, 2015; Lee et al., 2011; Lee, Wickrama, & Simons, 2013; Leidy et al., 2012; White et al., 2015). Other researchers identified the effect of poverty on the relationship of parenting practices (i.e., authoritarian vs authoritative) and parental stress and their relation to negative adolescent behaviors (Belsky, Schlomer, & Ellis, 2012; Carlo et al., 2011; Holtrop, McNeil Smith, & Scott, 2015; Lee et al., 2011; Mesman et al., 2012; White et al., 2015). These researchers examined which parenting practices were predictive of adolescent behavior outcomes. Few researchers, however, have identified how age-specific influences of parental behaviors (parental support, involvement, communication, and limit setting) and parental stressors impact young children's socialemotional problems (internalizing and externalizing behavior problems). Similarly, no researchers have identified if parental behaviors (parental support, involvement, communication, and limit setting) mediated the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11; therefore, a gap appeared to exist in the literature. Research findings in this area provided a basis for developing approaches to reducing stress related to low SES, improving outcomes for children and addressing the social, emotional, and developmental issues that extended from these types of difficult situations (Mistry, Lowe, Renner, & Chien, 2008; Nelson, O'Brien, Blankson, Calkins, & Keane, 2009; Reising et al., 2013). A fuller understanding of the way in which Hispanic families address these stressors and how this can impact choices about participation in programs can help reduce family stress and improve parental behaviors.

Purpose of the Study

The purpose of this study was to quantitatively examine the relation between parental behaviors (mediator variables – parental support, involvement, communication, and limit setting), parental stress (independent variable – total stress), and children's social-emotional problems (dependent variables – internalizing and externalizing behavior problems). Specifically, the purpose was to examine the extent of the influence on children's socioemotional development and to assess their variation by child age. The findings could aid in the improvement of parent support by providing age-specific developmental influences, which focus on targeted strategies to assist families in improving their quality of parenting. The objectives of this study were

- To examine the relationship between parental stress (total stress) and children's social-emotional development (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families.
- To examine the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's socialemotional development (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families.
- 3. To examine the extent of parental behaviors (parental support, involvement, communication, and limit setting) as a possible mediator in the relationship between parental stress (total stress) and children's social-

emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families.

The study established an association between low SES and poor outcomes for children, specifically in Hispanic families. It provided a foundation for methods for change, by relating the problem to age-specific mechanisms, through which professionals and agencies can address this problem to improve outcomes for children. The study was shaped by a central view that age-specific interventions for children who are at-risk of poor outcomes are a beneficial strategy to address the challenges for this population.

Research Question and Hypotheses

The study was guided by the following research questions and hypotheses.

Research Question 1: What is the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11?

 H_01 : Parental stress (total stress) will not relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the Parent Stress Index, Fourth Edition Short Form (PSI-4-SF) and Child Behavior Checklist (CBCL/6-18).

 H_a 1: Parental stress (total stress) will relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF and CBCL/6-18.

Research Question 2: What is the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's social-

emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11?

 H_02 : Parental behaviors (parental support, involvement, communication, and limit setting) will not relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the Parent-Child Relationship Inventory (PCRI) and CBCL/6-18.

 H_a 2: Parental behaviors (parental support, involvement, communication, and limit setting) will relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PCRI and CBCL/6-18.

Research Question 3: What is the extent to which parental behaviors (parental support, involvement, communication, and limit setting) mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11?

 H_03 : Parental behaviors (parental support, involvement, communication, and limit setting) will not mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF, PCRI, and CBCL/6-18.

 H_a 3: Parental behaviors (parental support, involvement, communication, and limit setting) will mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low

socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF, PCRI, and CBCL/6-18.

Theoretical Framework for the Study

The theoretical framework for the study was based on the family stress model (Conger et al., 1997; Conger et al., 2010). This model was based on an integrated view of family process indicating that when factors such as economic hardship (e.g., low income, job loss); economic pressures (e.g., inability to pay bills, purchase basic necessities); parent's psychological distress (e.g., mental health: depression, hopelessness, anxiety, hostility, feelings of discouragement); interparental or marital relationship problems (e.g., low relationship satisfaction, less support); disrupted parenting (e.g., unsupportive and insensitive parenting practices, reduction in quantity and quality time spent interacting with children, harsh parenting, less provisions of social and cognitive enrichments, over-controlling and punitive behaviors toward children); child and adolescent adjustment problems (e.g., internalizing and externalizing problems in children, substance abuse problems, increase of conduct problems, less engaged in self-regulatory behaviors, academic problems, decrease of optimism); and community, individual, or family influences (e.g., lack of social support, coping strategies, effective problem solving skills, acculturative stress), cause tension in the family setting, the family system can be negatively impacted (Masarik & Conger, 2017).

Conger et al. (1997) asserted that if a family is negatively impacted by economic pressures resulting from poverty, the increased pressure placed on the parents can result in relational strain causing disruption for other family members. The children in these situations can be negatively impacted by the lack of parental attention, the presence of evident disruption in the marital dyad, and lack of nurturing that extends from parental responses to stress (Conger et al., 1997; Conger & Donnellan, 2007).

According to the family stress model, when economic disadvantage exists, defined as the presence of adverse economic situations and a disparity between family needs and the economic capabilities of the parents in the family, the stress within the family places children at high risk for many issues, such as psychological disorders (e.g., depression, anxiety), emotional struggles, and subsequent behavioral manifestations of the family stress (Conger & Conger, 2002). Factors like resilience and functioning prior to the onset of stress can play a role in how children fare in the presence of family stress; however, these children are at higher risk of detriments to wellbeing resulting from inconsistent participation by parents in the active process of parenting (Conger & Conger, 2002). This model provided the foundation for defining stress within the family and for assessing parental economic stress based on the inability to meet essential economic needs. This model also provided the background for the assertion that for populations atrisk for low SES, the impacts may be more acute.

In Chapter 2, this framework was used to assess parental stress; evaluate the connection between parental behaviors and parental stress; and then relate home-life experiences of children to their emotional, psychological, and behavioral expressions of family stress. Chapter 2 provided a foundation for the application of this model by evaluating the impacts of family stress for Hispanic children.

Nature of the Study

I used a quantitative correlational design guided by the family stress model. The study and the research questions were intended to determine if statistical patterns and relationships exist between the study variables. The study was designed to understand and describe if parental behaviors (mediator variables – parental support, involvement, communication, and limit setting) potentially mediate the relation between parental stress (independent variable – total stress) and children's social-emotional problems (dependent variables – internalizing and externalizing behavior problems) among low socioeconomic Hispanic families with children ages 6-11.

To identify possible covariates and control for these covariates of the influence of parental behaviors (parental support, involvement, communication, and limit setting) and parental stress (total stress) on children's social-emotional problems (internalizing and externalizing behavior problems), demographic variables included household income, household government public assistance status, mother's employment status, mother's education level, mother's Hispanic origin, mother's age, single- and two-parent family, marital/relationship status, child's Hispanic origin, child's gender, child's age, child's grade, number of members living in the household, number of children living in the household, and recent life changes.

Data on the relevant mediating (parental behaviors – parental support, involvement, communication, limit setting), independent (parental stress), dependent (children's social-emotional problems – internalizing and externalizing behavior problems), and demographic (household income, household government public assistance status, mother's employment status, mother's education level, mother's Hispanic origin, mother's age, single- and two-parent family, marital/relationship status, child's Hispanic origin, child's gender, child's age, child's grade, number of members living in the household, number of children living in the household, and recent life changes) variables were obtained via survey responses.

The rationale for the inclusion of study variables (parental behaviors – parental support, involvement, communication, and limit setting; parental stress – total stress; children's social-emotional problems – internalizing and externalizing behavior problems; and demographic) was based on previous findings in the literature. Previous researchers examined these variables independently or in conjunction with other variables and focused primarily on mechanisms that shape parental behaviors that influence adolescent outcomes, such as neighborhood or housing standards, material hardship, financial difficulties, SES, social supports, and maternal depression (Carlo et al., 2010; Carlo et al., 2011; Gonzales et al., 2011; Hoskins, 2014; Kang, 2013; Lee et al., 2011; Reising et al., 2013; Rijlaarsdam et al., 2013; White et al., 2015).

Definition of Terms

Child characteristics: This reflected the perceived child factors that have an influence on the parent's stress levels (e.g., the child's ability to adjust to change, the child's hyperactivity and/or distractibility, the child's mood disturbances, and the parent's perception regarding their child's level of demand and emotional character and if it meets their own expectations.

Child development: Child development described the child's cognitive, socialemotional, language and communication, and learning and academic competencies.

Children's social-emotional problems: Children's social-emotional problems described the child's internalizing and externalizing problems. These behaviors reflected problems within the child such as attention, emotional reactivity, somatic complaints,

anxiety, depression, and peer relationships (Achenbach & Edelbrock, 1978; Puff & Renk, 2014).

Cognitive competence: Characterized the child's thought processes - thinking, reasoning and making inferences, and processing information (i.e., evaluating and generating ideas; Hackman et al., 2015; Hartas, 2011; Nievar et al., 2014; Schady et al., 2015; Sun & Hui, 2012). The degree in which children understand the relationships between ideas and how things work and use this knowledge to make decisions and solve problems.

Hispanic: Hispanic in the United States are persons who have a "self-described ancestry, lineage, heritage, nationality group or country of birth" (Stepler & Brown, 2016, p. 5) of "Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race" (U.S. Census Bureau, 2013, para 1). The Mexican population is the largest subgroup of Hispanics, estimated to be 64% in 2014; Puerto Rican are 9.6%, Salvadoran are 3.8%, Cuban are 3.7%, Dominican are 3.2%, Guatemalan are 2.4%, and other are 13.2% (Stepler & Brown, 2016). Other can be further stratified into: Colombians, Hondurans, Spaniards, Ecuadorians, and Peruvians (approximately 1% of the Hispanic population); Nicaraguans, Venezuelans, Argentineans, Panamanians, Chileans, Costa Ricans, Bolivians, Uruguayans, and Paraguayans (approximately less than 1% of the Hispanic population); and not otherwise specified (approximately 3.2% of the Hispanic population; Stepler & Brown, 2016).

Learning and academic competence: Characterized the child's school readiness and achievement (i.e., literacy, reading comprehension and mathematical skills; Crosnoe & Cooper, 2010; Hackman et al., 2015; Hair et al., 2015; Hartas, 2011) and commitment

to learn (i.e., motivated to learn and do well in school, engaged in learning; Mannes, Roehlkepartain, & Benson, 2005; Scales, 1999).

Language and communication competence: Characterized the child's verbal expressive and receptive communication (Hartas, 2011; Rubio-Codina, Attanasio, Meghir, Varela, & Grantham-McGregor, 2015).

Low SES and economically disadvantaged: The federal poverty levels were based on the poverty income guidelines issued annually by the U.S. Department of Health and Human Services (DHHS) and the U.S. Department of Agriculture (USDA). The guidelines were used to determine eligibility for federal programs, such as food stamps, Medicaid, and National School Lunch Program (DHHS, 2017b). Agencies determine eligibility based on the persons in the household and household annual income. Families of school-age children meet the criteria for free meals and reduced-price meals if they lived at or below the federal income poverty guidelines (e.g. household of 1 with annual income of \$15,678-\$22,311 would qualify for the school lunch program - add \$5,434-\$7,773 for each additional person in the household; DHSS, 2017a; USDA, 2017).

Parental behaviors: Parental behaviors were defined by parenting attitudes and skills toward their children and parenting. It referred to the level of emotional and social support the parent receives; the extent of pleasure and fulfillment they derive in being a parent; the level of parent interaction, communication, and knowledge of their child's life; a parent's ability to promote autonomy in their child; parent's attitude regarding gender roles in parenting; and parenting styles (Abidin, 1992; Baumrind, 1991; Gerard, 1994; Puff, & Renk, 2014).

Parent characteristics: This reflected the stress related to the parent's functioning (e.g., the parent's level of confidence in their parenting skills, parent's social support, emotional closeness to their child, parent's sense of autonomy, spouse/parenting partner relationship).

Parental stress: Parental stress was defined by dissatisfaction or difficulties with parent characteristics, child characteristics, and situational/life demographics (Abidin, 1990; Puff & Renk, 2014).

Situational/life stresses: This reflected stress that is caused by factors outside the parent-child relationship and are directly related to the role of being a parent (e.g., economic difficulties, loss of employment, social/marital relationships).

Social-emotional competence: Characterized the child's social and adaptive competencies (Allen-Meares, 2008; Crick & Dodge, 1994; Guerra & Bradshaw, 2008; Guerra & Huesmann, 2004; Leidy et al., 2012; Nelson et al., 2009; Nievar et al., 2014). The degree in which children develop self-control (i.e., self-regulation-identifying, monitoring, and regulating emotions and stress; impulse control); social-awareness (i.e., how they relate to others and develop positive relationships); perspective (i.e., concerned about how situations and their consequences impact others); self-reliance and autonomy; empathy (i.e., understand and share the feelings and emotions of others); positive sense of self (i.e., self-awareness of their own feelings, desires, character, and motive; their sense of volition of how their actions and choices affect others; self-efficacy - belief in their ability to succeed; self-esteem - confidence in their own abilities or worth; self-respect); coping behaviors to adapt to situations and environments; decision-making and social problem solving skills (i.e., think about actions; interpret situations; set limits, goals, or desired outcomes for situations; evaluate solutions; and anticipate consequences); a moral belief system (i.e., belief on how individuals should behave or act in relation to others; encompass a moral identity of social responsibility, restraint, caring, social justice, respect, integrity, and honesty); prosocial connectedness (i.e., sense of belonging, investment, attachment, engagement, and bonding to the social groups and environment such as peer groups, caregivers, family, school, and other settings and institutions).

Assumptions

This study was based on the assumption that parents would contribute freely and provide correct autonomous responses to the items on the survey instruments. It was assumed that parents would recognize the impact of the stress in their lives and they could indicate when their stress resulted in poor outcomes for their children. Because the study relied on self-reported data, the study was reliant on a high degree of personal reflectiveness on the part of mothers who are struggling with low SES. Lastly, it was assumed that participants would truthfully report their Hispanic classification.

Scope of Delimitations

The focus of the study on parental behaviors and parental stress impact on children's socioemotional development was selected to promote a deeper understanding of the effects produced by low socioeconomic factors on parenting and their effects on child outcomes. The research was conducted at one site: an elementary school at a South Texas school district where children were labeled as economically disadvantaged. Hispanic families were selected as participants over others with the consideration that these parents had children ages 6-11.

The eligibility criteria for participation in the study was as follows:
- Families were living at or below the federal poverty line (i.e., child were identified as economically disadvantage at current or previous school year and qualify for free or reduced school lunches)
- Families were from single- and two-parent family; families had a child in first to fifth grade attending the study target school (in the event there was more than one child in the target age range living in the household, mothers were instructed to choose the child that is closest to the age of 11).
- Mothers agreed to participate; the mothers were living with the child, and self-identify as Hispanic (i.e., Hispanic, Latino, or Spanish origin).

I focused on the assessment of children attending a selected elementary school at a South Texas school district; therefore, the population could not be randomly selected. Because of limitations in the population size, convenience sampling, and the demographic characteristics of both the population and the selected school, this research study was not highly generalizable across populations. The outcomes of the study were generalizable only to Hispanic families in the United States.

Limitations

There were a few limitations of the study. The first limitation was within the makeup of the sample, which was relatively homogeneous. The majority of the participants were low socioeconomic, Hispanic families with children ages 6-11. The second limitation was that the study was correlational in nature, so causation could not be inferred. The third limitation was the method in which the data were collected. The data were the mothers' self-reported responses to the instruments. The fourth limitation was

the sampling strategy used to select the participants, a convenience sample. The participants were recruited from an elementary school at a South Texas school district, which can offer no guarantee of mixed opinions and results.

Another limitation was within the method of measuring children's socialemotional problems. To measure children's social-emotional problems, I used a selfreport instrument that measured the mother's perceived level of the child's socialemotional problems. The use of parent report alone brought questions of the reliability of the data. Parents could have overreported or underreported a child's social-emotional problems for various reasons, such as lack or limited knowledge of age appropriate child's competencies and behavioral/emotional problems, their own biased views of and attitudes about their child, and wanting themselves and their child to be viewed in a positive light.

Significance of the Study

I addressed the impact of poverty on the outcome for children from Hispanic households. This was a significant problem, especially in populations already at-risk for poor outcomes related to income, shelter, and food insecurities. Because of the negative impact of stress on parental interactions, children who are raised in poverty have a high risk of negative emotional, social, and behavioral outcomes (Slack et al., 2011). This problem was especially acute for Hispanics, a population with the lowest median age and an annual average growth rate of 2.2% per year (Krogstad & Lopez, 2015) and the highest rate of mothers raising children in poverty (Broussard et al., 2012).

Texas has one of the highest rates of unintended pregnancy in the country, with about 62 unintended pregnancies occurring per 1,000 women versus about 52 unintended pregnancies per 1,000 women nationally (Vasquez, McDonald, Homedes, & Brown, 2015). Texas also has a higher than average overall fertility rate and the fifth highest rate of pregnancies amongst teenage mothers (Vasquez et al., 2015). Hispanic women in Texas account for about 1/5 of all Hispanic births in the United States and had one of the highest fertility rates (Vasquez et al., 2015). In addition, unintended births in South Texas, including the communities of Brownsville-Matamoros along the Texas-Mexico border, is 22% more than amongst other Hispanic communities (Vasquez et al., 2015).

It was of importance to understand the relation between and among parental behaviors, parental stress, and children's social-emotional problems in an effort to improve the quality of parenting of low socioeconomic Hispanic families by advancing motherhood in Hispanic and Texas communities. I attempted to influence social change by improving the quality of parenting and potentially reducing the negative impacts of parental issues that included ineffective parenting, problematic parental behaviors, aggression, and poor social functioning (e.g., through early identification and intervention of at-risk families in need of support from services such as mental health, social services, etc.). I further attempted to influence social change by the development and/or improvement in more targeted and relevant interventions for parent support (e.g., through a better understanding of age-specific developmental influences) in low socioeconomic Hispanic families with children ages 6-11. Improving the quality of parenting could improve a parent's sense of self-efficacy and competency; increase the use of positive parenting behaviors; increase social support connections; and improve the parent-child relationship, child behavior, and parent's mental health wellbeing (Rothe, Rogers-Tanner, & Skrypek, 2016).

The findings from this study have the potential to improve the quality of parenting in low socioeconomic Hispanic families with children ages 6-11 in the United States, which could affect social change via enhanced interventions, leading to an overall community improvement (i.e., integration and development of public health, mental health, educational support, and social services support to inform the creation of early intervention services) of parent-child relationship and child outcomes.

Summary

Children with low SES in states like Texas, especially Hispanic populations, are at risk for a variety of factors that negatively impact social, emotional, and academic success. I outlined the cyclical nature of poverty and the belief that disruptions caused by family distress resulted in maladaptive behaviors in childhood. The purpose of study was to examine the relationship between parental stress and the social-emotional development of children in Hispanic families and to consider the way parents implement strategies in the home to mediate for stress. I focused on the family stress model presented by Conger et al. (1997) and research into the role that family stress plays in psychological and social development. The purpose of this study was to address a gap in existing research about the conditions and behaviors that influence the development of Hispanic children. The introduction provided the foundational information for the creation of a literature review in Chapter 2.

Chapter 2: Literature Review

Parenting is one of the most important factors in child development, as parental behaviors are reflected in the child's personality (Gonzales et al., 2011). Hispanic children are the largest population living in poverty in the United States (5.4 million; Krogstad, 2014). Families of young children facing the stressors of living under disadvantage conditions (i.e., economic hardship) do not readily receive adequate support for reducing family stress, addressing or anticipating common behavior problems, or raising healthy children (Brotman et al., 2011, p. 258). Children are faced with a higher probability of their key social relationships (i.e., parent-child relationship) being disrupted (Blair & Raver, 2012, p. 310). Parents' lives are disrupted by the stress of economic hardship. It alters the organization of the home, the mental and emotional wellbeing of the family, and the family relations (Conger et al., 2010). Consequently, efforts to support parenting quality in low socioeconomic Hispanic families with younger children typically "ignore the diverse cultural dimension of families" (Lopez, 2015, p. 134) and tend to focus more on adolescent's wellbeing (Delgado, Killoren, & Updegraff, 2013; Gonzales et al., 2011; Hoskins, 2014; Lee et al., 2013; Stein et al., 2015; Stein, Gonzalez, & Huq, 2012; White et al., 2015).

Studies "have primarily involved... adolescents; it could be that family stress processes have been shown to be most salient for social and emotional problems because the greatest risk for these difficulties occur during adolescence" (Conger et al., 2010, p. 17). A child's major developmental task occurs in early childhood (Conger et al., 2010), such as cognitive competencies (e.g., thinking, reasoning, making inferences; Hackman et al., 2015; Hartas, 2011; Nievar, Moske, Johnson, Chen, 2014; Schady et al., 2015; Sun & Hui, 2012), social-emotional competencies (e.g., self-regulation of emotions, development of positive relationships, autonomy, empathy, self-awareness, self-esteem, coping skills, problem-solving skills, integrity, bonding to social groups and environment; Allen-Meares, 2008; Crick & Dodge, 1994; Guerra & Bradshaw, 2008; Guerra & Huesmann, 2004; Leidy et al., 2012; Nelson et al., 2009; Nievar et al., 2014), language and communication competencies (e.g., verbal expressive and receptive communication; Hartas, 2011; Rubio-Codina et al., 2015), and learning and academic competencies (e.g., school readiness, academic achievement, engagement in learning; Crosnoe & Cooper, 2010; Hackman et al., 2015; Hair et al., 2015; Hartas, 2011; Mannes et al., 2005; Scales, 1999).

Hispanic children and adolescents in low SES families are at a higher risk of poor outcomes across the lifespan than other racial/ethnic groups (Conger et al., 2010; Kena et al., 2015; Mulligan et al., 2012). There is a relationship between disadvantaged SES and a healthy child development (Brotman et al., 2011, p. 270), emotional challenges (Yoshikawa, et al., 2012), maladaptive parental behaviors (Gridley et al., 2013; Kang, 2013; Manuel et al., 2012; Reising et al., 2013; Rijlaarsdam et al., 2013), and poor educational outcomes (Hair et al., 2015). Studies examining parental behaviors in Hispanic families have yielded mixed results. Hispanic parents rely on positive parenting practices (i.e., monitoring, noncoercive discipline, praise, positive reinforcement, problemsolving practices, positive involvement, communicate openly, limit setting) more than White parents, while other scholars indicate that Hispanic parents use less responsive (i.e., authoritarian, lower levels of parental warmth) and harsher parenting (i.e., spanking, scolding, criticism) practices than their White counterparts (Delgado et al., 2013; Gonzales et at., 2011; Hill, 2006; Holtrop et al., 2015; Leidy et al., 2012; Parke et al., 2004; Weis & Toolis, 2010; White et al., 2015). Scholars have indicated an association between parental functioning, parenting skills, parental stress, social support, spousal relationships, and child development (Conger & Conger, 2002; Conger et al., 2010; Gaviţa, Joyce, & David, 2011; Lee, et al., 2011; Puff & Renk, 2014; Raver, Gershoff, & Aber, 2007; Slack et al., 2011). Children who grow up in environments with high levels of parental stress are likely to demonstrate a variety of emotional, social, and cognitive challenges (Puff & Renk, 2014; Slack et al., 2011). A variety of researchers have integrated views of outcomes for children at different ages; however, there is a gap in the research about age-specific exposure to parental stress and the influence on outcomes for children living in poverty.

Subsequently, I focused on an assessment of research that displayed a connection between low SES and poor outcomes in Hispanic families with a view of the age-related mechanisms that may play a role in directing parent support services. This study added to the body of research by considering age-related outcomes for Hispanic children ages 6-11.

In this chapter, I present the literature search strategy to demonstrate a reproducible approach to procuring research on the topic, starting first with the theoretical foundation of the study, which presented research into its application for other populations. In addition, in this review of the literature, I relate the findings in studies on the impacts of family stress, family behaviors, and the behaviors and developmental capabilities of children, especially those between the ages of 6-11. The conclusions drawn from the literature review are summarized as a starting point in the development of

a methodological approach to understanding the problem for low SES Hispanic children in this age group.

Literature Search Strategy

An initial search conducted using the Google Scholar search engine provided sources on the family stress theory, the impacts of poverty, and demographic data on high-risk populations. This information was then used as a basis for focused searches of library-based electronic databases, including EBSCOHost, ERIC, PsychNet, Medline, and Academic Search Complete. Three separate search segments were undertaken to explore all aspects of the study, with crossover between (a) the family stress theory, (b) low SES and parental stress-related behaviors, and (c) the impacts of parental stress on child development. The first search strings included the following: *family stress theory, family stress theory* and *low SES, demographics* and *family stress, poverty* and *family stress* and *child development*. The second search strings included *low SES* and *parental stress, parental stress* and *parental stress and child development*. The final search focused on the following search strings: *Parental stress* and *child development*. The final search focused on the following search strings: *Parental stress* and *child development*; *home environment* and *child development* in elementary school, home environment and development ages 6-11, low SES and *child development* ages 6-11.

Searches were limited first to sources dated from 2012 to the present with a focus on published, peer-reviewed research articles. After identifying sources from these materials, the search was widened to include some older sources, including sources from 2009 and 2010, to provide a more inclusive view of how the issues presented have been explored in recent years. Seminal research focused on the application of the family stress theory and its application in understanding parenting dynamics included older source materials.

Theoretical Foundation

The theoretical foundation for this study was based on the family stress model explicated by Conger et al. (1997) and linked to initial assessments of family stress theory-based Hill's assessment of family stress and subsequent research about its impacts (Conger et al., 1997; Conger et al., 2010; Hobfoll & Spielberger, 1992). According to this model, family stress can be impacted by four types of factors: the nature of the stressor, the family resources that are present at the time that stressors present, the family perceptions of how to address stressors, and the stress outcomes (Hobfoll & Spielberger, 1992). This theoretical perspective provides an understanding of the essence of family stress and the negative changes that can occur in the presence of conditions that impair social support or create negative responses to stress within familial relationships. Hobfoll and Spielberger (1992) maintained that one of the key factors determining how families address stress is the presence or absence of resources to adjust to stressful conditions. Subsequently, Conger et al. (1997) reflected upon this view they applied family stress theories to the development of the family stress model.

This model was based on the view that the relational functions within the family are innately impacted by stress and that parental stress can play a role in determining the function of families. Conger et al. (1997) reflected on the impact that economic stressors have on family function, and this was linked to the initial view presented by Hill in 1949 about the role that resources play in determining the response to stress. Conger et al. (1997) and Conger et al. (2010) maintained that families that experience lack of resources and economic pressures resulting from poverty experience social and emotional responses to the stress that impact family interactions. The presence of notable and/or measurable family stress related to economic conditions has been identified as a condition within the family that impacts the parenting, social functioning, behavioral, and cognitive development of individuals within the family (Conger & Conger, 2002; Conger & Donnellan, 2007). Figure 1 demonstrates the foundational elements of the model and the belief that stress, particularly stress caused by economic struggles, can lead to disrupted parenting that impacts the development of children in the family.



Figure 1. Foundational elements model of how stress affects parenting. Adapted from "The role of economic pressure in the lives of parents and their adolescents: The Family Stress Model" by K. J. Conger, M. A. Rueter, and R. D. Conger, 2000, In L. J. Crockett and R. K. Silberiesen (Eds.), *Negotiating adolescence in times of social change* (pp. 201-223). Cambridge: Cambridge University Press.

Economic hardship impacts the wellbeing of the family functioning and individuals through the economic pressures created in daily living, that is, the inability to pay bills, limited resources and therefore, the need to cut back on goods and services (Nievar et al., 2014, p. 320). Researchers have validated the effect of economic hardship on maternal stress, parental psychological distress (i.e., maternal depressive symptoms), and parenting practices that directly affect a child's development (Benner & Su Yeong, 2010; Delgado et al., 2013; Emmen et al., 2013; Gonzales et al., 2011; Hackman et al., 2015; Jocson & McLoyd, 2015; Landers-Potts et al., 2015; Lee et al., 2011; Lee et al., 2013; Leidy et al., 2012; McConnell, Breitkreuz, & Savage, 2011; Mesman et al., 2012; Newland, Crnic, Cox, & Mills-Koonce, 2013; Nievar et al., 2014; Parke et al., 2004; Ponnet, 2014; Rijlaarsdam et al., 2013). Other researchers indicated that pressures and stressors related with economic hardship may explain paternal and maternal depressive symptoms (Benner & Su Yeong, 2010; Delgado et al., 2013; Lee et al., 2011; Parke et al., 2004). Researchers of family stress model examined mediating factors mostly in adolescent samples. Acculturation stress, parental psychological stress, parents' social support, parenting practices, and economic hardship mediate positive parenting (Emmen et al., 2013; Lee et al., 2011), parental behaviors and economic pressure (Newland et al., 2013), and children's difficulties and SES (Lee et al., 2011; Lee et al., 2013; McConnell et al. 2011).

Emmen et al. (2013) maintained that children who are raised in conditions where economic challenges are present experience "less-than-optimal parenting" that results from family stress (p. 896). Emmen et al. related the application of the family stress model through the research conducted by Conger and Donnellan (2007) and maintained that there are discrepancies that emerge for minority families who already have generally lower SES backgrounds than majority families in this country. In addressing the application of the family stress model for evaluating conditions for the population evaluated in this study, it was important to consider the factors that influence SES for minority populations, including Hispanics. Conger and Donnellan recognized that economic pressures that are specific to populations can have an impact on family functioning, while Emmen et al. maintained that minority status presents challenges because of the link to socioeconomic disadvantages. The contexts of families in economic hardship differ from those of middle-income families partly due to limited resources and greater economic pressure and stress on families.

This framework is linked to factors that influence family process, including socioeconomic factors, with behavioral changes in parenting and problematic outcomes for children (Zeiders et al., 2011). White et al. (2015) studied the application of the family stress model as a framework for understanding how family stress and environmental conditions can impact adolescent adjustment. Zeiders et al. (2011) maintained that economic status, neighborhood conditions, and parenting process can have an impact on an adolescent's capacity to address adversity. In a study of families of Mexican origin, White et al. (2015) looked at mother-youth dyads (as well as fatheryouth dyads) to assess the impacts of family stress and the mediating impacts. White et al. indicated that there was a significant connection between maternal interactions and adolescent emotional, psychological, and social functioning. In the presence of adverse conditions in the neighborhood or school, parental interactions could mediate or exacerbate the experiences of children. White et al. identified the impacts of economic pressure on maternal interactions. Stress can have a negative impact on maternal warmth, a mediating factor for neighborhood adversity (White et al., 2015). White et al. demonstrated a connection between the family stress model and the conditions that result from low-SES family situations. The family stress model underscored the value of reflecting upon methods to mitigate for stressors to address developmental and behavioral issues for children being raised in poverty. This theoretical framework was used to evaluate the impacts of parental stress and the conditions that influence parental

behaviors, in order to address the emotional, behavioral, and psychological function of children raised in poverty (Newland et al., 2013).

Literature Review Related to Study Variables

Recent researchers examining the impacts of poverty on children in the United States reflected a variety of issues that stem from this problem. Newland et al. (2013) reported that in 2009, over 1/5 of the parents with children in the United States were raising their children in poverty. Although one of the most affluent countries in the world, the United States has a high level of poverty that unequally impacts ethnic and racial minorities (Edin & Kissane, 2010). Approximately 8.6% of non-Hispanic White children were raised in poverty, while more than 23% of Hispanics lived in similar conditions (Edin & Kissane, 2010). Children raised by single mothers, raised in households with non-English speaking parents, and in urban neighborhoods all experienced disproportionately high levels of poverty (Edin & Kissane, 2010; Gonzales et al., 2011).

Children who are raised in poverty have more than just economic challenges; many demonstrate the potential for significant cognitive, social, emotional, behavioral, and physical challenges (Emmen et al., 2013; Newland et al., 2013). Parents are generally unable to hide stress related to economic instability, and parents affected by hardship can demonstrate poor parenting choices, including harsh parental behaviors (Abidin, 1990, 1992; Newland et al., 2013).

Parental Stress

Researchers have evaluated the role of parental stress on the physical and mental health outcomes impacting young children at different developmental stages, identifying the negative effects demonstrated by physical and mental health issues that emerge in childhood (Roberts et al., 2013; Sameroff, 2010; Shonkoff, 2010; Shonkoff & Garner, 2012; Victorino & Gauthier, 2009). Some of the most common childhood outcomes can be impacted by family stress that impact children at different age groups and at different levels (National Scientific Council on the Developing Child, 2005; Roberts et al., 2013; Sameroff, 2010; Shonkoff, 2010; Shonkoff & Garner, 2012; Victorino & Gauthier, 2009). Roberts et al. (2013) recognized that exposure to family stress, including stress that results in family violence, often occurs before the age of 5, and that the outcomes, including maladaptive behaviors, occur almost immediately. The developmental outcomes could be impacted by both biological and environmental conditions that can have a range of implications (Sameroff, 2010). Children of low SES are more likely to demonstrate chronic diseases, including asthma and migraines, but different populations are at varied levels of risk (Victorino & Gauthier, 2009)

Newland et al. (2013) and Emmen et al. (2013) recognized that no single variable determines the functional relationship between parents and their children or influences child development above all others, although Emmen et al. contended that SES is one of the strongest influences. There are a range of other potential mediating and moderating factors influencing parenting process and child development, including early parenthood, single parenthood, the number of children in a family, the quality of the home and living environment, parental relationships, parenting beliefs, and social support mechanisms. Multiple indicators of risk for poor outcomes in childhood are often discussed for populations with low SES and one or more other factors (Belsky et al., 2012).

Parental Stress Among Low Socioeconomic Families

The general assumption that parental stress has an impact on family functioning has been evaluated by researchers, including Evans and Kim (2013) and Conger et al. (2010). Evans and Kim related the belief that chronic stress that occurs when parents and children live in poverty can have lifelong impacts for family members. Parental stress related to SES occurs because of essential insecurities, including lack of housing, food, and overall stability (Kang, 2013; Slack et al., 2011). Parents are not only challenged with the issues related to low income levels and lack of stability but may also demonstrate considerable parental stress when SES impacts children.

Emmen et al. (2013) recognized that not all the data about the impacts of economic hardship for ethnic minorities suggests negative outcomes. Emmen et al. cited studies about the fact that economic disadvantage can lead to either vulnerability for poor outcomes, or resilience (Benner & Su Yeong, 2010; Conger & Conger, 2002). In many more studies researchers revealed the connection between low SES and predictors for negative outcomes, even extending the research into the impacts for psychopathology in children (Flouri, Mavroveli, & Tzavidis, 2010). Flouri et al. (2010) described this in terms of the development of contextual risk, primarily assessed in relation to family SES and the adversity faced by these families, but also related this to parenting and maternal psychopathology. In some cases, viewing the nature of poverty as a suboptimal condition that is not inherent to be chosen begs the question of whether individuals who live in poverty sometimes have contributing conditions, including mental illness or ineffective coping mechanisms that can also impact their capacity to parent (Yoshikawa et al., 2012).

Economic difficulties are one of the more pressing issues that impact families (Mesman et al., 2012). The connection between parental stress and economic stressors has been linked in research by Puff and Renk (2014) and Mesman et al. (2012). Living in poverty and the heightened economic distress that goes hand in hand with this kind of home life situation are considered some of the causative factors for poor parenting choices and family dysfunction that impact children (Mesman et al., 2012).

Parental Behaviors

The proper functioning of a child is not based on just one single factor but a combination of variables in the family (Weis & Toolis, 2010). Such variables as financial stability (Lee et al., 2011; Puff & Renk, 2014), marital relationship (Nelson et al., 2009), parental social support (Kang, 2013; Lee et al., 2011; Manuel et al., 2012), physical home and living environment (Gridley et al., 2013; Gonzales et al., 2011; Jocson & McLoyd, 2015; Rijlaarsdam et al., 2013), the relationship between parent-child (Carlo et al., 2011; Zeiders et al., 2011), and parent and child physical and mental health (Carlo et al., 2011; Chen et al., 2011; Lee et al., 2013; Manuel et al., 2012; Reising et al., 2013; Rijlaarsdam et al., 2013; Come into play. Parenting behaviors are especially important to children's development (Weis & Toolis, 2010, p. 850). A parent's warmth or "responsiveness" to a child "reflects the degree to which parents show acceptance of their children through affection, shared activities and emotional or tangible support" (Maccoby & Martin, 1983 as cited in Weis & Toolis, 2010, p. 850) has been presented to be an important factor in children's developmental outcomes. Parents that are responsive to their children signal that they are involved, nurturing, (Benner & Su Yeong, 2010) and

"sensitive to their children's needs...communicates to their children that they are worthy of the attention and care of others" (Weis & Toolis, 2010, p. 850).

Positive parenting models and prosocial parental behaviors can reduce the challenges facing children who experience other risk factors for poor developmental, social, and academic outcomes, including mitigating for the impacts of poverty (Slack et al., 2011). Inversely, children who are exposed to poor parenting models or who experience parenting riddled with the effects of financial hardship, interpersonal conflicts, and psychological distress demonstrate a range of negative indicators leading to poor outcomes. Negative parental behaviors result in issues such as child neglect, early marriages, increased delinquency, suicide, and lack of education among other things to the child.

Parental Behaviors Among Low Socioeconomic Families

Children of low SES families are more likely to demonstrate food and housing insecurity, economic disadvantage, frequent relocation, conduct disorders, maladaptive emotional problems, and developmental struggles (Kang, 2013; Rijlaarsdam et al., 2013; Slack et al., 2011). Parental factors, including ineffective parenting, parental stress, and problematic parental behaviors (e.g., substance use disorders, aggression, poor social functioning) are often linked to social and economic stressors and are especially acute in populations that experience significant levels of SES disadvantage, including ethnic minorities (Slack et al., 2011).

Fuligni et al. (2013) maintained that maternal interactions often reveal significant differences between different populations, including majority and ethnic minority populations. Mesman et al. (2012) maintained that Hispanic children and children of other ethnic groups often experience a lack of opportunities because of factors that hinder effective parenting. Subsequently, researchers maintain the importance of creating methods through which the parents of children in low SES, specifically ethnic populations, can develop necessary skills to ensure positive outcomes (Belsky et al., 2012; Benner & Su Yeong, 2010; Delgado et al., 2013; Gonzales et al., 2011; Letourneau, Duffett-Leger, Levac, Watson, & Young-Morris, 2011; Mesman et al., 2012; Parke et al., 2004; Puff & Renk, 2014; Rubio-Codina et al., 2015; Shonkoff & Garner, 2012; Yoshikawa et al., 2012; Zeiders et al., 2011). At the same time, detrimental economic conditions have frequently been noted as having an indirect, but measurable impact on how families function, how parents interact, and how children develop (Newland et al., 2013, p. 96). Few researchers would deny the impact that financial stress has on the capacity of a parent or a parental dyad to function. Whether discussing ethnic minorities or simply reflecting on the impacts of SES on outcomes for children, economic disadvantage impacts how families function on a very basic behavioral level (Edin & Kissane, 2010; Wagner, Mills-Koonce, Willoughby, Zvara, & Cox, 2015).

Blair and Raver (2012) considered the physiological and psychological impacts of low SES on both children and adults in the family setting. Economic pressures that stem from instability inherently increase parental stress levels and have been noted as a predictive element impacting the quality of parenting (Evans & Kim, 2013). Higher parental stress levels predict lower quality parenting and can create challenging home-life issues that can impact dynamics in the home setting. Subsequently, low SES and high levels of parental stress have been identified as potential factors impacting the long-term developmental trajectories for children and the psychological and physical health of both adults and children (Conger et al., 2010).

Children's Social-Emotional Problems

Educators have recognized that low SES has a major impact on the skills and abilities that children bring to their earliest educational experiences. Crosnoe and Cooper (2010) argued that children who are disadvantaged economically often come to school with less developed cognitive skills and subsequently do not perform as well as their nondisadvantaged counterparts in basic skills assessments. Economic hardship places children at risk for disrupted lives, poor dynamics, and economic stratification that impacts them on a variety of levels, such as home stability, parent relationship, learning, and social and emotional adjustment (Crosnoe & Cooper, 2010).

Researchers have also studied what Crosnoe and Cooper (2010) described as the presence of a constellation of issues that are related to economic hardship and influence the functioning of both parents and children in a family. These can include depression, behavioral issues, and cognitive delays. Parents who also struggle with these elements may be less prepared to address the needs of their children and end cycles of poverty or problematic outcomes (Crosnoe & Cooper, 2010). Hartas (2011) argued that parents play a significant role in how children learn language, adapt, and learn functional behaviors. Subsequently, parents who are able to support the learning of their children are more likely to experience favorable outcomes.

Children's Social-Emotional Problems Among Low Socioeconomic Families

Poverty impacts about 20% of the population of children under the age of 18 in this country, and another 20% live very close to the poverty level set by the federal

government (Yoshikawa et al., 2012). Researchers have identified poverty as the central factor that impacts young children's behavioral, emotional, and mental health (Yoshikawa et al., 2012). In a review of data from a 2009 National Research Council and Institute of Medicine study, Yoshikawa et al. (2012) made distinct connections between the poverty and the onset of mental, emotional and behavioral issues which begin in early childhood.

Parents with low SES are more likely to experience contextual distractions from the actions in the home that foster learning, language development, literacy and prosocial behaviors (Hartas, 2011). This underscored the belief that parents who are unable to take time with their children because of economic barriers or distractions and ill-equipped functioning are likely to have children who are less prepared to enter educational experiences, less able to cope with stress, and less behaviorally functional than their middle-class counterparts. Because of the connection between low SES and low educational levels, children living in poverty are often parented by individuals who are not educated and may not be aware of the children's developmental gaps (Hughes & Ensor, 2009). Parents who are distracted (i.e., by the struggles of living in poverty) experience interpersonal conflict, and do not function within the family because of the stressors related to economic instability (Edin & Kissane, 2010) are likely to hinder the executive functioning of their children, creating cycles of poor performance and poor attention that can influence outcomes for children (Rochette & Bernier, 2014). Stress hormone levels increase in children who experience parental stressors related to low SES, and the increase in cortisol levels (the hormone) impact self-control, emotional regulation, and academic performance (Blair & Raver, 2012; Shonkoff & Garner, 2012;

U.S. Department of Health and Human Services, National Institutes of Health [NIH], 2012;). A small increase in cortisol levels could be motivational, while large increases, caused in many cases by extenuating parental circumstances and stress-inducing behaviors in the home, can detract from executive functioning (Blair & Raver, 2012; NIH, 2012; Shonkoff & Garner, 2012).

Letourneau et al. (2011) and McConnell et al. (2011) maintained that there is a significant relationship between SES and a child's development. While this has been disputed in some respects by findings of resilience and the belief that parental interactions play a larger role (Conger et al., 2010; Emmen et al., 2013), the assertion made by these researchers has a significant foundation. Odgers et al. (2012) argued that parental action can play a mediating role for socioeconomic disparities in children between the ages of 5-12. Odgers et al. indicated that children can grow up in poor neighborhoods and be at risk for problematic educational and social outcomes; but, that parents capable of focusing on child well-being are likely to reduce the risk of poor outcomes. Though poverty is the single largest potential threat to well-being in children in this age group, parental actions and a focus on prosocial parenting can disrupt the pattern of negative interactions that reduce a child's functioning (Odgers et al., 2012).

Conger et al. (2010) related the belief that researchers often look at the impacts of poverty on adolescents, without looking at the development trajectories across the lifespan that are impacted by poverty. Much of the existing literature is focused specifically at the impacts of parental stress caused by low SES on development in childhood, without recognizing that poverty itself (external of parental stress caused by poverty) could be viewed as a major stressor (Conger & Conger, 2002; Conger & Donnelan, 2007; Conger et al., 2010), particularly children who live in poverty often live in substandard housing, in chaotic home environments, or lack overall stability in their living situation.

Correspondingly, these children may also experience higher levels of family turmoil or conflict in the home, and the accumulation of stressors has an impact on physiological and psychological functioning (Conger et al., 2010). Riina, Lippert, and Brooks-Gunn (2016) suggested that "living in unstable neighborhoods" is a "detriment to multiple dimensions of parenting and relationship dynamics for Hispanic families" (p. 864), specifically heightened levels of parent-child conflict (p. 856). Chen and Miller (2012) further expounded on this idea by maintaining that there are some factors that can impact how a child responds to the stressors imposed by low SES, including optimistic or hopeful beliefs, and persistence in coping as children that could reduce the adverse impacts of low SES.

Parental Stress and Parental Behaviors Among Low Socioeconomic Hispanic Families

Parental stress can be caused by a variety of factors and are frequently compounded by the specific conditions that occur as a result of living in poverty. Low SES parents demonstrate stress in the family setting in ways that often foster poor parenting choices (Emmen et al., 2013). Emmen et al. (2013) maintained that minority families, who are more likely to come from lower SES families, also experience a variety of other stressors that can impact their functioning in the family setting, including language barriers and acculturation challenges. Emmen et al. studied minority status in general and observed the presence of psychological stressors impacting parenting and were able to demonstrate the impacts of low SES and minority status on parental behaviors.

Some distinct parental behaviors that were impacted by stressors for minority parents included the ability to assess a child's need for responsiveness by the parent or the ability to regulate emotional responses (Emmen et al., 2013; Leidy et al., 2012; Mesman et al., 2012). Some parenting skills, including the ability to respond to a child's needs, the respect for a child's autonomy, and the capacity to reflect appropriate parental roles, are less developed in minority parents with low SES (Emmen et al., 2013). Aligned with this is the view that higher SES can be associated with positive parenting styles, but this was clearly demonstrated with both majority and minority parent populations (Emmen et al., 2013).

Parental Stress and Children's Social-Emotional Problems Among Low Socioeconomic Hispanic Families

Parental distress is a major causative factor for poor social-emotional functioning and poor overall developmental trajectories for children from low-income minority families (Gonzales et al., 2011). Parental distress is aligned in a range of studies to experiences that impact parental emotional functioning, including distress over lack of financial security, family dissolution, and occupational or educational distress (Gonzales et al., 2011). While many researchers have looked at the impacts of parental stress on emotional development from a psychological perspective, Blair and Raver (2012) maintained that there are also distinct physiological changes related to the stress response specific to children along a developmental continuum. Leidy et al. (2012) maintained that minority children are exposed to parental stressors that are specific to the cultural and social conditions in which they live. This includes the belief that immigrant Hispanic children live with economic conditions that are harsh and adverse, including living conditions in unsafe neighborhoods, limited resources, and stressful working conditions that result in the presence of stress in the home (Leidy et al., 2012).

Emmen et al. (2013), Leidy et al. (2012), and Parke et al. (2004) argued that low SES Hispanic families experience high levels of stress that influence how children develop. Parental stress impacts the conditions in the home so acutely that researchers argued that Hispanic families living in childhood have higher rates of family dissolution, instability, and parental distress than their non-Hispanic counterparts (Gonzales et al., 2011; Leidy et al., 2012; Parke et al., 2004). Further parental stress plays a major role in determining the social, emotional and functional aspects of family interactions that can define how parents and children interact (Conger et al., 2010; Crosnoe & Cooper, 2010; Emmen et al., 2013; Lee et al., 2013; Leidy et al., 2012; Zeiders et al., 2011). Stress in the home can have a variety of impacts however, not all of which are negative. For instance, the idea that children of adversity, especially ethnic minorities, can succeed is often related to the motivating elements of increased cortisol levels that occur in the presence of parental stress (Blair & Raver, 2012; Shonkoff & Garner, 2012). Children initially respond with a motivation for change, but continual stress-inducting behaviors in the home and poor conditions for parental functioning can detract from executive function (Blair & Raver, 2012; NIH, 2012; Raver et al., 2007; Shonkoff & Garner, 2012). In recognizing the impacts of parental stress, it is important to determine how stress impacts parental behaviors in low SES homes.

Parental Behaviors and Children's Social-Emotional Problems Among Low Socioeconomic Hispanic Families

Parental behaviors have a significant impact on the social and emotional development of children in Hispanic families. Parents in low SES Hispanic families often struggle meeting the social, emotional and academic needs of their children and make negative choices that can negatively impact early childhood development. For instance, Hispanic parents are less likely to participate in social support networks that could benefit their children from an early age, such as support groups, agency support (e.g., mental health, public assistance), or family support (Ayón, 2011; Lopez, 2015; Turner et al., 2015). This population is hard hit by the conditions imposed by poverty, but often may not take steps to improve the conditions in which their children live and develop (Ayón, 2011; Lopez, 2015).

Other parental behaviors that are specific to Hispanic parents and influence the social and emotional outcomes of children include low levels of maternal warmth, high levels of harsh parenting, low levels of parental educational participation, and high levels of familism (Leidy et al., 2012; Maríñez-Lora & Quintana, 2009; White et al., 2015).

Leidy et al. (2012) looked at some of the positive elements of parental behavior that could impact the experiences of children from low SES Hispanic families. These researchers evaluated children, in this study those between the ages of 9-12 to determine how parental interactions and behaviors of recent immigrant families impacted the social competence and function of their children. These researchers recognized that there were a number of social conditions that had an influence on the resilience of Hispanic children and their capacity to respond to stressors both in the home and in educational settings. In particular, focus group data collected by Leidy et al. reflected challenges related to acculturation, loss of a sense of power or control, inability to participate actively in a child's education (primarily due to language barriers and negative responses to discrimination).

For low SES Hispanic children, there are many mitigating factors that result in problematic parental behaviors that impact the developmental trajectories for children. These include parental language barrier and stressors related to poor assimilation in the dominant culture that can influence how children participate both educationally and socially (Hoff, 2013). Social and language barriers on the part of parents can translate into behaviors that create division and do not foster positive childhood adjustment (Hartas, 2011). The presence of parental behaviors that negatively impact children must also be understood in terms of the way in which behaviors influence psychological and physiological development.

Researchers recognized that children who live in stressful situations and experience negative parental interactions demonstrate physiological changes that occur as early as 7 months of age (Blair & Raver, 2012; NIH, 2012). Poverty and parental stress-based behaviors can result in changes in cortisol levels that impact the development of the brain (Blair & Raver, 2012; NIH, 2012; Shonkoff & Garner, 2012). The impacts of these stressors caused by low-income status can interfere with regulatory systems and coping (Blair & Raver, 2012; NIH, 2012; NIH, 2012). This study is important because it creates a rationale for studying the impacts of parental stress and poor parental behaviors that cause childhood stress on early childhood development. Previous studies, including the study by Gonzales and colleagues (2011), have focused on the impacts of stressful parental behaviors on adolescents. Other researchers looked at younger populations, drawing on the belief that the continuum of child development can reflect the negative impacts of poverty, parental stress, and poor parenting choices on the stress levels for children as young as 7 months (Blair & Raver, 2012; NIH, 2012; Puff & Renk, 2014).

The range of problems that can result from poor parenting choices, family stress, and adversity caused by poverty for Hispanic children are reflected in the research by Blair and Raver (2012). These include poverty-related psychobiological changes that extend from adversity and include regulatory deficits, including the inability to direct attention or maintain control. Parental challenges can result in selfregulatory deficits, weaker inhibitory control, poor self-control, and a lack of capacity for working memory, all of which can influence the potential that these children have for academic, social, and economic gains.

One of the misnomers produced by researchers is that parents of children living in poverty are inherently less responsive or less attentive than the parents of children not living in poverty. There are a number of parenting factors that influence outcomes for children and less responsive and harsher parenting were viewed as contributing to issues of self-regulation and poor functioning in academic settings (Blair & Raver, 2012; Conger & Donnellan, 2007; Emmen et al., 2013; Leidy et al., 2012). This underscores the belief that there are a range of parental responses and behaviors that extend from poverty and can influence outcomes for children (Wagner et al., 2015).

Hispanic Families Living in Low Socioeconomic Conditions

The Hispanic subculture is the fastest growing population in this country, comprised of both longstanding Hispanic families and the families of new workers or undocumented immigrants and their families. Leidy et al. (2012) maintained the importance of creating a response to family process and child development that impacts how this large and growing population is perceived. Existing studies on the impacts of parental behaviors on family process (Blair & Raver, 2012; Emmen, et al., 2013; Evans & Kim, 2013; Leidy et al., 2012), parental stress on family behaviors (Zeiders et al., 2011), and the impact of both on the psychological functioning of children in low SES Hispanic families provided a foundation for this study (Gonzales et al., 2011; Holtrop et al., 2015; Jocson & McLoyd, 2015; Parke et al., 2004; Puff & Renk, 2014; Rijlaarsdam et al., 2013; Yoshikawa et al., 2012; Zeiders et al., 2011).

The children who live in poverty experience a range of social and academic disadvantages when compared to children not living in poverty (Gonzales et al., 2011; Hackman, Gallop, Evans, & Farah, 2015; Hartas, 2011; Parke et al., 2004; Puff & Renk, 2014), there are specific factors that influence the lives of Hispanic children living in poverty that make these disadvantages more acute. Hispanic children living in poverty often grow up in families where language barriers exist, an element that can detract from their capacity for language assimilation and for developing early ready tools that can influence educational outcomes (Emmen et al., 2013; Hartas, 2011; Hoff, 2013; Leidy et al., 2012). In addition, children living in poverty are vulnerable to social stigmatization, parental violence, and parental drug use that are exacerbated by low SES (Holtrop et al., 2015; Leidy et al., 2012; White et al., 2015; Zimmerman & Messner, 2013). This

problem is not unique to all populations but is especially difficult to mitigate for when parents and children experience barriers to seeking social and medical support (Ayón, 2011; Lopez, 2015; Stein, Gonzalez, Cupito, Kiang, & Supple, 2015; Turner et al., 2015).

The connection between parental stress and family functioning often neglects to fully define how stress impacts parental behaviors, based on the fact that this connection is somewhat indirect (Abidin, 1990; Abidin, 1992). Considering the impacts of stress on parental behaviors reveals some important projections for behavior challenges in children living in poverty. Neece et al. (2012) argued that the connection between parental stress and outcomes for children can be described as transactional because parental stress results in poor behaviors that result in the modeling of behaviors that are adapted by children. This is especially true when assessing stress responses of parents of young children, including those ages 9 and younger, and evaluating social and behavioral development in relation to expected milestones (Neece et al., 2012). Assessing the impacts of parental stress and behaviors on child development requires a close scrutiny of research about the functions of parenting in demonstrating appropriate behaviors, modeling problematic behaviors, creating social and emotional expectations, and developing cognitive skills.

Bronfenberenner (1986) maintained that the psychological functioning of young children and adolescents is impacted by the roles of their parents and home environment. Ecological factors influence child's development throughout their lifespan. They influence whether a child repeats the poor value systems and problematic behavior patterns that are a function of their family unit or if they develop into resilient adults resilient adults. Bronfenbrenner also maintained that children are influenced by multiple systems at the same time, and that family issues can be mitigated by positive school environments or positive cultural environments, especially before the onset of adolescence. One of the challenges specific to low SES Hispanic children before adolescence is that they may experience parental distress, familial dissolution, and underperforming low-income schools (Gonzales et al., 2011).

The problem for low SES Hispanic children is that there is the potential for multiple mitigating factors for the onset of stress related to family functioning and parental behaviors. Hoff (2013) maintained that parental language barrier and stressors related to poor assimilation in the dominant culture can result in poor early language trajectories when children enter school that is subsequently realized as children begin elementary learning. This has been supported in research that indicated that children raised in homes where social and language barriers exist are likely to demonstrate problems adjusting to transition to school (Hartas, 2011).

The literature demonstrated a connection among essential variables, including parental stress, parental behaviors, child psychological and physiological functioning, and SES. The body of literature inherently supports the belief that there are connections among the variables that go beyond the typical belief that children of poverty have difficulties or that the parents of poverty struggle with home life functioning. The gap in the literature that has emerged relates directly to the timing and age at which children reflect upon parental stress and parental behavioral functioning in the home and the need to assess mitigating factors from an early age that can result in shifts in outcomes for children. Hispanic children living in poverty in this country represent one of the fastest growing populations and their functioning can have a significant impact on communities, social cultures, and educational systems (Gonzales et al., 2011; Holtrop et al., 2015; Leidy et al., 2012). The ability to respond to the needs of children by recognizing the role that parents and home life play in functioning are important aspects of this study. The assessment of variables like parental stress, parental behaviors, and the psychological and social functioning of children can have a significant impact for this population. The ability to view the need for change in response to family process is reflected in a variety of studies on the influence of parenting process on child development in Hispanic populations.

Because of the role that parental emotional status and stability play in outcomes for children, researches have considered the impacts of low SES on parental emotional functioning as a predictor for childhood risk of poor outcomes. Low SES can play a role in shaping other conditions that negatively impact children, including the onset of depressive symptoms in parents, especially mothers (Lee et al. 2011). Reising et al. (2013) and Stein et al. (2012) maintained that parental emotional status and response to childhood needs can be significant predictors in the development of internalizing (i.e., depression) and externalizing (i.e., aggressive behavior) symptoms in Hispanic children. There appears to be a significant body of evidence that reveals that low SES Hispanic children are at greater risk of social, cognitive and emotional issues, but many of these are tied transactionally to the role of parents and their capacity for mediating against the negative impacts of low SES.

Summary and Conclusions

Researchers have reflected a variety of perspectives on the issue of the impact of low SES on Hispanic children between the ages of 6-11. There was considerable evidence that there are negative factors that result from parental stress responses to unstable economic conditions that can hinder the function of families. Researchers also revealed that when parents are capable of interacting and supporting cognitive and social development, regardless of SES, the outcomes for their children do not lag significantly behind their financially secure counterparts. At the same time, there was significant research that links SES to parental stressors, parental behavioral functioning, and family stress that clearly influence how a child develops. One significant gap in the literature was how age influences child development in relation to family stress scenarios, especially for ethnic minorities.

Scholars have demonstrated a connection between family stress and poor overall outcomes for children. One element that was missing from the debate about the impacts of resilience is that age may play a role in how children perceive their functioning in the family, how their cognitive and behavioral development impacts their functioning, and the devilment of emotional issues. Subsequently, it can be maintained that age may be a factor in determining how children perceive their capacity for resilience and if they can perceive a route to change that could positive impact long-term cognitive, social, emotional and behavioral outcomes for children between the ages of 6-11. This study was in the pursuit of information to gain a closer understanding of age as an influencing factor in the problem of parental stress influencing outcomes for children.

Chapter 3 included details regarding the study methodology used to evaluate the potential mediating effect of parental behaviors on the relationships between parental stress and children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11, as specified via the research questions.

Chapter 3: Research Method

The purpose of this study was to apply a quantitative correlational approach to examine the relationship of parental behaviors and parental stress on the socioemotional development of children between the ages of 6-11 in low SES Hispanic families. The relationship of parental behaviors as a mediating variable impacting the relationship between parental stress and socioemotional problems was assessed through the lens of child/parent relational behaviors. I also evaluated the potential for introducing parental support mechanisms to improve parental interactions with the aim of addressing agespecific developmental influences.

The goal was to build on existing knowledge regarding the relationship of parental stress on parental behaviors for young children, as well as the factors contributing to parental stress, including socioeconomic and cultural factors that may place young children at risk of problems in achieving social developmental milestones. I sought to establish a link between SES and poor behavioral, academic, and social outcomes for children in Hispanic communities. The goal of this study was to provide support for the argument that mechanisms for change need to be based in an acknowledgement of the factors impacting parenting process and parental stress for low SES Hispanic families and relate change to deficiencies aligned with developmental milestones for children. Age-specific interventions for children at risk of poor outcomes can benefit populations, in this case, Hispanic children between the ages of 6-11.

This chapter includes the research design and rationale and the research methodology. This includes an identification of the Hispanic population studied, the sampling approach, and the methods used to recruit participants. This chapter further includes a detailed view of how the data were collected with reference to the methods for securing data using three instruments: The PSI-4-SF (Abidin, 2012), the PCRI (Gerard, 1994), and the CBCL/6-18 (Achenbach & Rescorla, 2001). Information about all three of these instruments is provided with a focus on the availability of Spanish language versions of each. The operationalization of constructs and variables, as well the plan for data analyses, are included in this chapter. Any threats to validity, both internally and externally, are identified as a part of this methods chapter. The chapter further includes approaches to ensure the ethical procedures used with the population, including adherence to the institutional review board standards.

Research Design and Rationale

Research Design

The research design for this study was quantitative with the use of correlational analysis of data collected through instruments in relation to the mediating, independent, and dependent variables. I evaluated the impacts of parental stress on two different populations, those who were identified as having mediated parental behaviors that impact the parent-child relationship, and those who did not. I analyzed such variables as the child's age to examine the influences the effects of parental behaviors and parental stress have on children's socioemotional outcomes, by helping to determine the age-specific developmental influences. Statistical methodologies included descriptive analysis, one-way ANOVA, Pearson *r* correlation coefficient, and path analysis.

Rationale

The rationale for this approach was based on the findings in existing studies about the issues of parental stress related to low SES, the relationship on parental practices, and the effect on child development with an impact for Hispanic families (Blair & Raver, 2012; Emmen et al., 2013; Evans & Kim, 2013; Gonzales et al., 2011; Gridley et al., 2013; Holtrop et al., 2015; Hoskins, 2014; Kang, 2013; Leidy et al., 2012; Manuel et al., 2012; Parke et al., 2004; Puff & Renk, 2014; Reising et al., 2013; Rijlaarsdam et al., 2013; White et al., 2015). Researchers have linked parental process and the activities in the home to varying degrees of social, physical, and academic functioning (Bernier et al., 2012; Emmen et al., 2013; Gonzales et al., 2011; Gridley et al., 2013; Rijlaarsdam et al., 2013). Researchers have also maintained that there are varying outcomes for children who are raised in adversity, including those raised in poverty (Blair & Raver, 2012; Chen & Miller, 2012; Shonkoff & Garner, 2012). Emmen et al. (2013) maintained that parental stress related to socioeconomic conditions can play a role in child development, especially for ethnic minorities.

In some cases, low SES and high levels of coping related to chronic stress can have some positive impacts on childhood motivation for change (Evans & Kim, 2013). Although individual resilience plays a role in determining outcomes for children living in poverty, social support mechanisms and parental coping impact outcomes (Conger & Conger, 2002; Emmen et al., 2013; Kang, 2013; Lee et al., 2013; Leidy et al., 2012; Manuel et al., 2012; Masarik & Conger, 2017; McConnell, Breitkreuz, & Savage, 2011; Puff & Renk, 2014; Stein et al., 2012; Stein et al., 2015; White et al., 2015). Conger and Donnellan (2007) and Emmen et al. (2013) maintained that parental behaviors in the presence of stress play a role. There are a variety of ways of looking at the connection between childhood poverty and the conditions in which low SES children are raised that can impact outcomes, especially for Hispanic children. I wished to extend research into
an area influencing potential resilience. Parental functioning has an impact on child development that can be viewed at different periods (Gaviţa et al., 2011; Puff & Renk, 2014; Raver et al., 2007; Slack et al., 2011).

Building on previous findings, I examined the relationship among Hispanic families with children between the ages of 6-11, parental behaviors (parental support, involvement, communication, and limit setting), parental stress, and children's socioemotional behaviors (internalizing and externalizing behavior problems). Previous findings focused on the belief that the continuum of children's and adolescents' social, emotional, and behavioral development (i.e., internalizing and externalizing behavior problems) can reflect the negative impacts of economic hardship, positive and negative parental choices (i.e., social support, positive involvement, open communication, limit setting, harsh parenting), and parental stress have on the adjustment levels for young children and adolescents (Delgado et al., 2013; Gonzales et al., 2011; Holtrop et al., 2015; Kang, 2013; Lee et al., 2011; Leidy et al., 2012; Manuel et al., 2012). I addressed which underlying parental behaviors are triggered and exacerbated by parental stressors and which child social-emotional problems are potentially impacted. I sought to quantitatively address the variables influencing child development in this population reflecting the potential for using this design to evaluate larger segments of the population. Further, I examined the relationship between parental behaviors and parental stress and their influence on children's socioemotional development to analyze if they vary by child age and to aid in the improvement of the parent support by providing age-specific developmental influences. The Hispanic population has been neglected in such studies, especially young Hispanic children.

Time and Resource Constraints

Because of the need to evaluate each family using three separate instruments and a demographic questionnaire, each family was required at least 50 minutes of time allocated to the evaluation process. The number of participants were based on a priori power analysis.

Advancing Knowledge in the Discipline

Researchers identified the connection between age-specific exposure to problematic parental stress and poor outcomes for children living in poverty. The introduction of positive parental behaviors can help to mitigate some of the challenges that occur as a result of parental stress for Hispanic children living in poverty. Results of this study were added to the body of research by considering age-related outcomes for Hispanic children ages 6-11 and providing data that demonstrates potential mediating factors for children prior to adolescence.

Methodology

The quantitative, correlational method was to gather data that may be used to generate generalizable results. Approaches were used that are replicable and reflect the methods for selecting the participants and evaluating them using the following instruments: demographic questionnaire, the PSI-4-SF (Abidin, 2012), the PCRI (Gerard, 1994), and the CBCL/6-18 (Achenbach & Rescorla, 2001).

Population

The population for this research consisted of parents of Hispanic families with children ages 6-11 who were of low SES from an elementary school at a South Texas school district. Low socioeconomic children in educational systems in Texas who were identified as economically disadvantaged were recruited for the study. A child was identified economically disadvantaged based on his or her eligibility for free meals and reduced prices meals, which was determined by the USDA (2017) federal income poverty guidelines (e.g. household of 1 with annual income of \$15,678-\$22,311 would qualify for the school lunch program - add \$5,434-\$7,773 for each additional person in the household).

To achieve a high number of participant families and to address constraints related to my travel distance, the participants were selected from a regional target population in a primarily Hispanic elementary school at a South Texas school district, in the Rio Grande Valley (RGV) located in the southernmost tip of South Texas, with a low SES and a 96%-100% of the population receiving free or reduced lunch (identified as economically disadvantaged). The RGV is comprised of 90.5% Hispanic population and is broken into four counties: Hidalgo County (91% Hispanic), Cameron County (88.5% Hispanic), Starr County (98.7% Hispanic), and Willacy County (87.5% Hispanic; U.S. Census Bureau, 2015a).

The elementary school in a South Texas school district was in the Hidalgo County area. According to the U.S. Census Bureau (2015b, 2015c, 2015d), 36.6% (269,751) of Hispanics in Hidalgo County are living below the poverty level of which 15.8% (42,663) are children ages 6-11 and 25% (184,955) of Hispanic households are headed by mothers and 12% (19,950) are living below the poverty level. Because this location allowed me access to participants in the community who met the eligibility criteria of the study and the need to apply four different instruments to each of the participants, convenience sampling was used.

Sampling and Sampling Procedures

The sampling occurred through requests from an elementary school at a South Texas school district for children ages 6-11 identified as economically disadvantaged. The director of schools and school principal (Appendix F) was contacted to seek consent so that they may send parents of children ages 6-11 in first to fifth grade an invitation letter (English and Spanish) to recruit mothers for the participation in this study.

The participants included mothers who met the eligibility criteria: child's age, living with child, income, Hispanic self-identification, and agreement for participation. Only the mothers from each family were asked to complete the information for each family. The data were collected from the mothers for a two-parent household or for a single-parent household. If there was more than one child living in the home ages 6-11, the data were collected from the child who was closest to the age of 11.

Four instruments were administered to mothers from the elementary school at a South Texas school district. The sampling plan for the mothers was to complete a demographic questionnaire and three instruments administered at a public space with me present. For the recruitment of low socioeconomic Hispanic mothers with children ages 6-11, an invitation letter was sent to parents by the elementary school who met the eligibility criteria. Participants were provided an envelope on the day the instruments were administered, and instruments were administered through an interview process. Once completed, the instruments were placed in the envelope and returned sealed to me. The sample size was limited to low socioeconomic Hispanic mothers with children ages 6-11 who agreed to participate in the study voluntarily and meet the eligibility criteria. A nonprobability sampling strategy was used for this study; therefore, the participants were not randomly selected. Given the time restraints and the availability of resources, convenience sampling was seen as an appropriate type of sampling method for this study (Farrokhi & Mahmoudi-Hamidabad, 2012). Compared to other sampling strategies, convenience sampling offers the strength of recruiting participants that are close and easily accessible, requires fewer personnel, consumes less time, and is cost effective (Farrokhi & Mahmoudi-Hamidabad, 2012). The drawback of convenience sampling is sampling bias or the possibility that the sample may not be representative of the larger population (limited generalizability; Farrokhi & Mahmoudi-Hamidabad, 2012). However, "most nonprobability sampling procedures, 'convenience' is a misnomer; nonprobability sampling requires very careful consideration, design, and execution of the sampling plan" (Meyer & Wilson, 2009, p. 26).

A statistical power analysis was calculated using G*Power to determine the sample size required for this study. A linear multiple regression *F* test power analysis was conducted specifying one predictor (independent variable), a medium effect size (f^2) of .15, alpha level (α) of .05, and power level (1- β) of .80.

The effect size (f²) of .15 was based on Cohen's (1992) guidelines (i.e., Pearson's r: .10, .30, & .50 and multiple regression: .02, .15, & .35 correlations) and moderate correlation outcomes on previous literature in the relationship between parental stress and children's social-emotional problems (Mensah & Kuranchie, 2013; Puff & Renk, 2014) and parental behaviors and children's social-emotional problems (Holtrop et al., 2015; Puff & Renk, 2014; White et al., 2015). Puff and Renk (2014) investigated various aspects of relatedness between parent life stress and young children's behavior problems

for 124 culturally diverse parents of children ages 2 to 6 years. On average, Puff and Renk found a moderate correlation between the variables ranging from .38 to .50. Puff and Renk also investigated parental behaviors in relation to young children's behavior problems. On average, Puff and Renk found a moderate correlation between the variables ranging from .26 to .39. Mensah and Kuranchie (2013) investigated various aspects of relatedness between parenting styles and child social outcomes for 480 students and 16 teachers from eight public and private school systems. Mensah and Kuranchie suggested a moderate effect size ranging from .31 to .51. White et al. (2015) investigated aspects of relatedness between family stress and adolescent adjustment problems for 749 Mexican mother-youth dyads and 467 Mexican father-youth adolescents. White et al. found a moderate correlation between the variables of .39. Likewise, Holtrop et al. (2015) investigated various aspects of parent practices and whether they predict child externalizing behavior problems for 83 Latino immigrant couples with young children. The correlational analysis ranged from .27 to .77; however, they were generally moderate. The outcomes of the studies justify the use of a medium effect size.

Along with the effect size of .15; the alpha of .05 and the power of .80 were proposed as the standard value for behavior science research based on Cohen's previous calculations (Ali, 2012; Cohen, 1992; Sullivan & Feinn, 2012). Selecting a power of .80 reduces the possibility of incurring a Type II error (Ali, 2012; Cohen, 1992). However, the Type I error (alpha [α] error) is more serious than a Type II error (beta [β] error), therefore, selecting a small alpha minimizes the risk of a Type I error (Gravetter & Wallnau, 2009; Sullivan & Feinn, 2012). Therefore, to avoid an incorrect assumption Cohen postulated the following estimation - the β error is 4 times (4 x 0.05 = 0.20) the α which has been widely used by researchers (Sullivan & Feinn, 2012). The alpha was set at .05 based on the probability of the β error of .20. This translates to the power of 1 - .20 = .80, deducing that 80% of the power corresponds to the β error of 20% (Ali, 2012; Cohen, 1992; Sullivan & Feinn, 2012). As a result, the priori power analysis suggested at least 55 participants would need to participate to detect significant effects if they exist.

Procedures for Recruitment, Participation, and Data Collection

Mothers were recruited for participation via an invitation letter sent out by an elementary school at a South Texas school district that is predominantly Hispanic and identified as economically disadvantaged.

Recruitment. Mothers with children ages 6-11 were sent an invitation letter with the child in a sealed envelope in English and Spanish (Appendix G). The letter briefly described why they were asked to participate in the study, what the study was about, who would be included in the study, the type of questions they would be asked to answer, the approximate time for completing all instruments, assurances that no identifying information would be attached to the questionnaires and would be identified by an assigned ID, and an explanation of potential benefits of participating in the study. The letter also included my contact information and invited the consenting parent (mother) to contact me if they were interested in participating in the study.

Participation. Participants were selected based on their response to the eligibility criteria: (a) mother of a child of 6-11 years of age attending school, (b) mother living with the child, (c) child identified as economic disadvantage (qualify for free or reduced school lunches), (d) mother identified as Hispanic, Latino, or Spanish origin, and (e)

mother consenting to participate. An interview session was scheduled at a public space for eligible participants to administer the instruments. All participants were provided informed consent and then asked to complete four instruments.

To ensure and maintain required confidentiality, each participant received a packet, along with an informed consent on the day the administration of the instruments. The packet included an envelope with an assigned unique ID number, and the four instruments; each instrument was assigned with the same ID number as indicated on the envelope. At the beginning of the interview process, each participant received my contact information and compensation for their participation. I reviewed with the participant the informed consent, their voluntary participation, reaffirmed confidentiality, explained the instruments and the procedure after completion of instruments, and exit from the study. Participants were provided a copy of the informed consent and informed that by completing the instruments they were agreeing to participate in the study. Then the participant was provided the instruments and after completion the participant placed each instrument in the envelope and handed me the sealed envelope. Instruments were administered through an interview process. Each question was read from a set of instruments and the participants recorded their answers on their set of instruments. Participants will receive a brochure that summarizes the studies key findings, through a mail/e-mail base list. However, participants may contact me to request further information regarding the study at its completion through a written request. In the event a participant wished not to take part in the study, changed their mind, or stopped during the study, they were thanked for their interest and provided my contact information.

Data collection. The data was collected from each of the participants using the demographic questionnaire (Appendix A), PSI-4-SF (Abidin, 2012), the PCRI (Gerard, 1994), and the CBCL/6-18 (Achenbach & Rescorla, 2001). Permission to use the PSI-4-SF (Appendix C), the PCRI (Appendix D), and the CBCL/6-18 (Appendix E) were granted by the publishers. After the data was collected from each participant, the data were coded and entered in SPSS statistical software for analysis.

Instrumentation and Operationalization of Constructs

Demographic. A demographic instrument was created for this study and asked questions about household income, household government public assistance status, mother's employment status, mother's education level, mother's Hispanic origin, mother's age, single- and two-parent family, marital/relationship status, child's Hispanic origin, child's gender, child's age, child's grade, number of members living in the household, number of children living in the household, and recent life changes (Appendix A) was administered. The instrument was completed by participants in approximately 10 minutes. The instrument was to assist in understanding the population studied and identifying factors that may influence the parental behaviors and parental stress on children's social-emotional problems.

Parental behaviors. Parenting behaviors were measured using the PCRI (Gerard, 1994). The PCRI was developed by Anthony Gerard in 1994. Since its development, it has been widely used to assess how parents view the process of parenting and how they perceive their own relationship with their child; for parents of children between 3 to 15 years of age (Gerard, 1994; Jacobsen, McKinney, & Hoick, 2014).

The PCRI is 78-item self-report instrument of parent perceptions of their skills, interaction and relationship with their children (Gerard, 1994). The instrument can be completed by an individual or group, at a 4th grade reading level, in approximately 15 minutes. The instrument is available in a variety of language formats that have been identified as highly valid instruments, including a Spanish language version (Ghosh Ippen, 2014). Permission to use the instrument was granted by the publisher (Appendix D).

The instrument includes seven content scales: (a) Parental Support scale (SUP; assesses the level of emotional and social support a parent receives, (b) Satisfaction with Parenting scale (SAT; measures the amount of pleasure and fulfillment an individual derives from being a parent), (c) Involvement scale (INV; examines the level of parent's interactions with and knowledge of their child), (d) Communication scale (COM; assesses a parent's perception of how effectively they communicate with a child), (e) Limit Setting scale (LIM; focuses on a parent's experience disciplining a child), (f) Autonomy scale (AUT; assesses the ability of a parent to promote a child's independence), and (g) Role Orientation scale (ROL; examines parent's attitudes about gender roles in parenting; Gerard, 1994, p. 1-2). The instrument also includes two validity indicators that measures the tendency of the parent to give socially desirable responses (Socially Desirability [SOC]) and inconsistent responses (Inconsistency [INC]; Gerard, 1994). The instrument uses a 4-point response Likert scale, in which participants respond 1 (strongly agree), 2 (agree), 3 (disagree), or 4 (strongly disagree; Gerard, 1994; Ghosh Ippen, 2014).

The seven subscales of the PCRI provide a means of assessing elements of the parenting process and of the relationship that develops between parent and child as a means of determining areas that are particularly successful or challenging. Jacobsen et al. (2014) maintained that when parents demonstrate a low score in autonomy, the relationship is dysfunctional because the child has an unhealthy level of dependence on the parent. This is often linked to the parent's inability to support a sense of independence in the child (Jacobsen et al., 2014).

There are 73 items included in the content scales and 26 keyed positively and 47 are keyed negatively and converted into *t*-scores from raw scores. If a positive item is given an agree or strongly agree response or if a negative item is given a disagree or strongly disagree response the scale score increases for that response (Gerard, 1994). Thus, *t*-scores 40 or greater suggest positive parenting, *t*-scores 30-39 suggests problems, and *t*-scores 29 or lower indicate serious problems (Gerard, 1994; Ghosh Ippen, 2014). The two validity indicators: SOC consist of 5 items, if scores are low it suggests the parent is giving distorted responses with a cutoff score of 9 or less (possible fake good); and INC consist of 10 pairs of highly correlated items, if scores are high it suggests random or inattentive responding with a cutoff score of 3 or greater (possible inconsistent responding; Gerard, 1994; Ghosh Ippen, 2014). In a normative sample of 1,139 (1.5% Hispanic) parents PCRI demonstrates adequate test-retest reliability (0.68-0.93) and internal consistency (Cronbach's alpha 0.7-.88; Gerard, 1994; Ghosh Ippen, 2014; Jacobsen et al., 2014).

Coffman, Guerin, and Gottfried (2006) were one of the few researchers in the past 10 years that evaluated the reliability and validity of the PCRI with a high degree of vigor. Coffman et al. (2006) maintained that the alignment between the content scales and the inventory were marked by a high degree of continuity and all scales possessed test-retest reliability and internal consistency.

Raya, Pino, and Herruzo (2011) demonstrated the application of the Spanish language version in assessing maternal and paternal practices and views of parenting process on their relationship with their children. Raya et al. used the Spanish version of the PCRI to assess parenting process using a direct score of the 78 items based on the Likert scale outcomes. The scores were grouped using the seven subscale elements, with high scores relating agreement with the situation defined within the scale. Raya et al. (2011) found a high degree of internal consistency when applying this language version and obtained a Cronbach's alpha coefficient of .87. The coefficient ranged from 0.68 (SUP) to 0.78 (SAT). Raya et al. also demonstrated that the parent content scales possessed good construct validity: INV and SAT (0.51), INV and COM (0.64), LIM and SUP (0.42), LIM and AUT (0.44), and SAT and LIM (0.37; p. 119). The consensus amongst researchers using the Spanish version of this instrument is that it has a similar degree of validity and reliability when compared to the English language version.

Parental stress. Parental stress was measured using the PSI-4-SF (Abidin, 2012). The PSI was developed by psychologist Abidin in 1983, currently in 4th edition. Since its development, it has been widely used to assess different aspects of stress related to parenting for parents with children 0 to 12 years of age (Byars, Yeomans-Maldonado, & Noll, 2011).

The full version instrument has 120-items, but a truncated version was created with just 36-items self-report instrument (the PSI short form, or PSI-SF) that made it

easier to assess primary indices of parental stress (Ghosh Ippen, Kuendig, & Mayorga, 2014; Kuendig, Ghosh Ippen, & Mayorga, 2014; Smith, Romski, Sevcik, Adamson, & Bakeman, 2011; Tervo, 2012). The short version could be completed by participants in approximately 10 minutes (Esposito et al., 2013). The instrument is available in a variety of language formats that have all been identified as highly valid instruments (Esposito et al., 2013), including a Spanish language version (Ghosh Ippen et al., 2014). Permission to use the instrument was granted by the publisher (Appendix C).

The PSI-SF is a standardized instrument that comprises of three subscale areas (12 items each): (a) Parent-Child Dysfunctional Interaction (assesses "the distress that parents feel about their parenting role in light of other personal stresses"; Espositio et al., 2013, p. 352), (b) Parental Distress (assesses "the distress that parents feel about their parenting role in light of other personal stresses"; Espositio et al., 2013, p. 352), and (c) Difficult Child (assesses the "behaviors that children often engage in that may make parenting easier or more difficult"; Espositio et al., 2013, p. 352); along with a Total Stress Score (assesses the overall stress parents experience in their parenting role; Abidin, 2012; Byars et al., 2011; Esposito et al., 2013; Smith et al., 2011). "There is a defensive responding scale that indicates the degree to which a parent may be minimizing problems" (Byars et al., 2011, p. 900). The instrument uses a 5-point response Likert scale, in which participants respond 1 (strongly agree), 2 (agree), 3 (not sure), 4 (disagree), and 5 (strongly disagree; Esposito et al., 2013; Tervo, 2012).

Scores are derived from the normative sample from the frequency distribution, which are converted into percentiles from raw scores (Byars et al., 2011). Normal levels of stress range from 16th – 84th percentile. Higher scores indicate a higher level of parental stress, thus, scores in the 85th – 89th percentile are considered high stress and scores in the 90th percentile or greater are considered clinically significant stress (Abidin, 2012; Byars et al., 2011; Esposito et al., 2013; Ghosh Ippen et al., 2014; Tervo, 2012) and raw score below 10 is considered defensive responding (Abidin, 2012; Ghosh Ippen et al., 2014).

The PSI-SF has been used because of significant evidence of its validity and reliability and has demonstrated to have a high internal consistency (Cronbach's alpha 0.92; Esposito et al., 2013). In a normative sample of 800 (140% Hispanics) parents demonstrated adequate test-retest reliability (0.68-0.85) and internal consistency (Cronbach's alpha 0.80-0.91) in total stress area (0.84 and 0.95), parental distress subscale (0.85 and 0.90), parent-child dysfunctional interaction subscale (0.68 and 0.89), and difficult child subscale (0.78 and 0.88; Abidin, 1995; Abidin, 2012; Byars et al., 2011; Ghosh Ippen et al., 2014).

The PSI-SF was developed to evaluate parental stress by identifying potential areas that influence parental functioning and requires a 5th grade reading level. This is important to note because the PSI-SF has been used in a number of studies involving atrisk populations, including low SES parents and non-English speaking families (Abidin, Flens, & Austin, 1995; Smith et al., 2011). Solis and Abidin (1991) reported good internal consistency (Cronbach's alpha = 0.94) and concurrent criterion validity of the Spanish translation of the PSI with mothers born in Mexico, Carribean Islands, and Central and South America.

Smith et al. (2011) studied parental stress and its relation to communication as a foundation for understanding dysfunctional interactions between parents and children.

The PSI-SF was used to assess the parenting role and stress levels, with a focus on the specific issues for parents of children with physical and psychological challenges. Smith et al. used the short-form version and related the justification for the use of this instrument as related to the predictive validity identified by Abidin. "Internal consistency alphas for the PSI-SF in the sample were .93 and .92 for pre- and post-intervention, respectively, which correlates with the full-scale PSI" (Smith et al., 2011, p. 142, as cited in Abidin, 1995). The researchers were able to identify areas of parental stress and assess the connection between parental communications and relational dysfunctions based on the use of the PSI-SF (Smith et al., 2011).

Cappa, Begle, Conger, Dumas, and Conger (2011) maintained that instruments of parental stress in disadvantaged populations had a bidirectional relationship, suggesting that parental stress may be caused by specific relational conditions with children, and may also impact a child's capacity to apply coping mechanisms in the presence of dysfunction. Cappa et al. used the PSI-SF because it provided a means of assessing parental stress for specific at-risk populations, in this case low-income African American children. One of the key aspects of that study is that the researchers attempted to determine the bidirectional nature of the relationship between parental stress and child coping competence by controlling for behavioral issues occurring for many children. Researchers began assessing parental stress using the PSI-SF created by Abidin, which Begle, Dumas, and Hanson (2010, p. 212) and Cappa et al. (2011, p. 337) found was internally consistent (Cronbach's alpha=.91) and stable over a 6-month period (.84) in a normative sample. Both studies significantly predicted parental stress as a contributing factor to potential child abuse. Begle et al. (2010) demonstrated "internal consistency (Cronbach's alpha = .91), inter-item correlations (M = .22, range = .03 to .75), and interscale correlations (range = .23 to .65)" (p. 212).

Aracena et al. (2016) assessed the validity and reliability of the PSI-SF when applying the Spanish model to a population in Chile. These researchers evaluated this tool, which had been standardized for use with children from 1 month to 12 years of age but maintained that no previously identified studies existed to determine the standardization of the Spanish version for populations at-risk in Latin America. Arcena et al. set out to assess the internal and external validity of the instrument by assessing the PSI-SF in a sample population of 336 parent/child dyads in Chile. Arcena et al. found that the "internal consistency was high both for the total scale (Cronbach's $\alpha = 0.92$) and the three subscales (0.81: Parenting Distress; 0.89: Parent–Child Dysfunctional Interaction and 0.88: Difficult Child)" (Arcena et al., 2016, p. 3554). Arcena et al. maintained that the outcomes of their evaluation determined a high level of validity and reliability for the PSI-SF in Latin American populations (specifically Chilean) and suggested that the Spanish version of this instrument was beneficial when assessing Spanish speaking, socially vulnerable populations.

Díaz-Herrero, López-Pina, Pérez-López, de la Nuez, and Martínez-Fuentes (2011) recognized that the PSI-SF is often used to evaluate mother-child relationships, as in the study by Arcena et al. (2016); but that it had not frequently been used to evaluate Spanish speaking parent/child dyads that included fathers. Díaz-Herrero et al. evaluated the Spanish version of the PSI-SF by evaluating a population of 115 fathers and children. Díaz-Herrero et al. found that there was a high degree of internal consistency for each of the subscales, an indication of high reliability and validity for the Spanish form with fathers. In addition to the application of the PSI-SF with children of Spanish parents, Frontini, Moreira, and Canavarro (2016) and Pérez-Padilla, Menéndez, and Lozano (2015) evaluated the application of the instrument in terms of overall validity and reliability with at-risk populations. Pérez-Padilla et al. maintained the importance of reflecting on specific subscale variations in order to determine the best application of information derived from the PSI-SF for Hispanic or Spanish speaking populations.

Researchers such as Cappa et al. (2011) applied the instrument of parental stress to links to both child coping and child disruptive behaviors, maintaining that these elements are interconnected and could be viewed as cyclical. Childhood disruptive behaviors may cause a rise in parental stress, which could then result in poor parental behaviors that result in greater levels of disruptive behaviors by children. One of the most important aspects of Cappa et al.'s study when evaluating the impacts of parents' stress for at risk children is that after controlling for behavioral issues, the researchers found that children who live in homes where parental stress is high also experience high levels of coping competence.

Esposito et al. (2013) also applied the PSI-SF to evaluating the experiences of children but looked at the specific or potential physiological impacts of parental stress on children or the impact of childhood conditions on parental stress. Esposito et al. found that parental stress may contribute significantly to the onset of problematic conditions in childhood, including migraines. Esposito et al. used the Italian version of the PSI-SF as a standardized tool to evaluate parental stress across the four domains (Esposito et al., 2013). In comparative populations, Esposito et al. were able to show that there are linked connections between parental stress and childhood challenges and also demonstrated a

high degree of validity and reliability in the PSI-SF variant language forms (Esposito et al., 2013).

Child social-emotional problems. Child social-emotional problems were measured using the CBCl/6-18 (Achenbach & Rescorla, 2001). The CBCL/6-18 was developed by Achenbach in 1983 and is widely used to assess the absence or presence of behavioral and emotional problems (Mazefsky, Anderson, Conner, & Minshew, 2011); for parents of children between 6 to 18 years of age (Achenbach & Rescorla, 2001; Thorvaldsen, 2013).

The CBCL is self-report instrument of parents' knowledge of their child's behavioral and emotional problems. The instrument can be completed by an individual at a 5th grade reading level in approximately 15 minutes (Achenbach & Rescorla, 2001, Thorvaldsen, 2013). The instrument is available in a variety of language formats that have been identified as highly valid instruments, including a Spanish language version (Achenbach & Rescorla, 2001; Haack, Gerdes, Schneider, & Hurado, 2011; Thorvaldsen, 2013). Permission to use the instrument was granted by the publisher (Appendix E).

The CBCL/6-18 is a standardized instrument used to identify behavioral/emotional problems and social competence in children (Bordin et al., 2013). The instrument has readily been used in assessing school-aged children and in determining changes in the views of parents about child behaviors over time. The instrument comprises of two section: (a) competence scales and (b) syndrome scales (Achenbach & Rescorla, 2001; Bordin et al., 2013).

The first section, competence scales, includes three subscales (20 open ended responses items), along with a Total Competence scale (scored from the raw scale scores

obtained from the three subscales): (a) activities - the child's involvement in activities (e.g., how much time spent on activities, how active they are in clubs or groups, and how well they carry out jobs or chores), (b) social – the child's social interaction patterns (e.g., how many friends they have, how much time they spend with friends, and how well they get along with others), and (c) school – the child's school performance (e.g., how well they are performing in academic subjects or other areas of school; Achenbach & Rescorla, 2001; Bordin et al., 2013). This section also examines concerns regarding disability and illness, concerns and best things about the child.

The second section includes 113-items scored using a 3-point response Likert scale, in which participants respond 0 (not true), 1 (somewhat or sometimes true), or 2 (very true or often true), it also includes three open ended responses (Achenbach & Rescorla, 2001; Bordin et al., 2013; Thorvaldsen, 2013). The syndrome section assesses eight subscales: (a) Anxious/Depressed, (b) Withdrawn/Depressed, (c) Somatic Complaints, (d) Social Problems, (e) Thought Problems, (f) Attention Problems, (g) Rule-Breaking Behavior, and (h) Aggressive Behavior. It also includes two grouping scales: (a) Internalizing Behavior Problem scale (Anxious/Depressed, Withdrawn/Depressed, and Somatic Complaints) and (b) Externalizing Behavior Problem scale (Rule-Breaking Behavior and Aggressive Behavior), along with a Total Behavior Problem scale (scored from the sum of all subscales; Achenbach & Rescorla, 2001; Bordin et al., 2013).

Scores are derived from the two sections (competence scales and syndrome scales), which are converted into *t*-scores from raw scores (Achenbach & Rescorla, 2001; Bordin et al., 2013). *T*-score cut-offs are categorized as nonclinical (indicating no

significant concerns), borderline (indicating a need for close observation and follow-up to identify possible decrease and/or increase of areas of concern), and clinical (indicating significant deviant concerns) to determine the degree of deviance from normality from the scales (Bordin et al., 2013). The nonclinical category refers to high t-scores for the competence scales (t-scores 36 or greater) and total competence scale (t-scores 41 or greater) and low t-scores for the syndrome scales (t-scores 66 or lower) and the internalizing, externalizing, and total behavior scales (t-scores 59 or lower). The borderline category refers to an intermediate range of *t*-scores for the competence scales (t-scores ranging from 31-35), total competence scale (t-scores ranging from 37-40), syndrome scales (t-scores ranging from 65-71), and the internalizing, externalizing, and total behavior scales (t-scores ranging from 60-63). The clinical category refers to low tscores for the competence scales (t-scores 30 or lower) and total competence scale (tscores 36 or lower) and high t-scores for the syndrome scales (t-scores 70 or greater) and the internalizing, externalizing, and total behavior scales (*t*-scores 64 or greater). *T*scores for Total Competence are generated as low as 10 and for the Total Behavior scores are generated as low as 24 (Achenbach & Rescorla, 2001; Thorvaldsen, 2013).

Bordin et al. (2013) noted "children and adolescents may present *t*-scores in the clinical range for individual syndromes, while not presenting *t*-scores in the clinical range for internalizing, externalizing, or total problem scale" (, p. 17). In a normative sample of 2,029 (9% Latino) parents demonstrated adequate test-retest reliability (0.80-0.94), internal consistency (Cronbach's alpha 0.63-0.97), and interrater reliability (Pearson's r 0.57-0.88 (Thorvaldsen, 2013).

Bordin et al. (2013) explored the psychometric properties of the CBCL/6-18 and found that it had good test-retest reliability as well as a high degree of internal consistency. "Mean test-retest reliabilities for empirically based syndromes for the CBCL/6-18[was] 0.88" (Bordin et al., 2013, p. 19). In addition, "internal consistencies of problem scales as measured by Cronbach's alphas ranged from 0.72 to 0.97 for the CBCL" (Bordin et al., 2013, p. 20). "Mean test-retest reliabilities for the CBCL.... competence scales [was] 0.90" (Bordin et al., 2013, p. 19). Bordin et al. argued that the CBCL/6-18 had strong criterion related validity in both competence/adaptive and problem scales, though demographic differences were noted. One of the challenges in applying this checklist to populations of varied age is that there are some questions that do not relate to the average behaviors, or even defiant behaviors, of children over the age of 11 (Bordin et al., 2013).

Biederman et al. (2012) demonstrated the use of the earlier version of the checklist, the 1991 version, which included behavioral instruments for children beginning at age 4. Biederman et al. maintained that there was a high degree of test-retest reliability and overall findings validity; but there were some concerns about the application of all data sets related to children of varied ages. Biederman et al. (2012) demonstrated the application of this instrument to assess parental perspectives on child behaviors. CBCL assisted in distinguishing between two groups of emotional self-regulation problems in children with ADHD. One of the key elements that Biederman et al. evaluated was the specific considerations when applying this instrument to parental perspectives on children with Attention Deficit Hyperactivity Disorder.

Haack et al. (2011) applied the use of the CBCL/6-18 Spanish translation version to Latino parents with a child between the ages of 5 and 12 years of age. Participants were primarily married mothers of Mexican origin from various socioeconomic backgrounds and assessed the parents' perspectives on a child with ADHD. Haack et al. (2011) and Rubio-Stipec, Bird, Canino, & Gould (1990) maintained that the instrument had good ranges of internal consistency (0.89-.094) and that it was valuable on a broad externalizing scale. In addition, beneficial convergent construct validity was also an identifying rationale for the selection of the instrument in the study by Hack et. al. (2011).

Data Analyses Plan

In order to answer the research questions posed in the study, a number of statistical analysis were conducted. SPSS version 25.0 statistical software was used to answer the three research questions.

Descriptive analysis. Before conducting the analysis, a reliability analysis was calculated for each instrument (PSI-4-SF Abidin, 2012; PCRI, Gerard, 1994; and CBCL/6-18, Achenbach & Rescorla, 2001) to ensure that there was good internal consistency. Cronbach's alpha values were calculated to determine the internal consistency of each instrument's scale (PSI-4-SF – total stress scale, Abidin, 2012; PCRI – parental support, involvement, communication, and limit setting scales, Gerard, 1994; CBCL/6-18 – internalizing and externalizing behavior problems scales, Achenbach & Rescorla, 2001) used in the data analysis with the sample indicated. The Cronbach's alpha can range between 0 and 1.0, acceptable values range from 0.7 to 0.95 (Tavakol & Dennick, 2011).

The data were screened to identify and review assumptions (e.g., skewness, kurtosis, outliers, normality, linearity, homoscedasticity). Descriptive statistics (i.e., mean, standard deviation, frequency, and percent) were analyzed in the study variables: parental behaviors – parental support, involvement, communication, and limit setting (PCRI, Gerard, 1994), parental stress – total stress score (PSI-4-SF, Abidin, 2012), and children's social-emotional problems – internalizing and externalizing behavior problems (CBCL/6-18, Achenbach & Rescorla, 2001), along with demographic variables (household income, household government public assistance status, mother's employment status, mother's education level, mother's Hispanic origin, mother's age, single- and two-parent family, marital/relationship status, child's Hispanic origin, child's gender, child's age, child's grade, number of members living in the household, number of children living in the household, and recent life changes).

The results of the descriptive analysis were presented in Chapter 4.

Preliminary analysis. A subsequent analysis was conducted to identify the possible covariates in order to control for those covariates. A one-way ANOVA analysis was conducted between demographic variables (household income, household government public assistance status, mother's employment status, mother's education level, mother's Hispanic origin, mother's age, single- and two-parent family, marital/relationship status, child's Hispanic origin, child's gender, child's age, child's grade, number of members living in the household, number of children living in the household, and recent life changes) and the study variables: parental behaviors – parental support, involvement, communication, and limit setting (PCRI, Gerard, 1994), parental stress – total stress score (PSI-4-SF, Abidin, 2012), and children's social-emotional

problems – internalizing and externalizing behavior problems (CBCL/6-18, Achenbach & Rescorla, 2001). The analysis identified possible demographic variables that are associated to the study variables. Child's age was included as a covariate because of the standard practice in the existing literature. The identified demographic covariates were used in the path analysis for Research Question 3.

Research Question 1. What is the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF (Abidin, 2012) and CBCL/6/18 (Achenbach & Rescorla, 2001)?

A Pearson *r* correlation coefficient was used to determine the nature of the relationship between parental stress and children's social-emotional problems. It calculated the strength of the bivariate relationships between parental stress and children's social-emotional problems. The correlational analysis specifically examined the correlational scores between parental stress (total stress score; PSI-4-SF, Abidin, 2012) and two types of children's social-emotional problems (internalizing and externalizing behavior problems; CBCL/6-18, Achenbach & Rescorla, 2001).

The strength of the relationship between the variables were examined. The correlation coefficients range between -1.0 and +1.0 (Gravetter & Wallnau, 2009). Correlation coefficients that were larger were indicative of a stronger relationship between the variables, a correlation coefficient of 1 (absolute value) were indicative of a perfect relationship, and correlation coefficient close to 0 were indicative of no relationship between the variables (Gravetter & Wallnau, 2009). Significantly positive coefficients were indicative that more parental stress were related to more children's

social-emotional problems or fewer parental stress were related to fewer children's social-emotional problems, while significantly negative coefficients were indicative that more parental stress were related to fewer children's social-emotional problems or fewer parental stress were related to more children's social-emotional problems.

The strength of the relationship between the variables were interpreted using Cohen's (*d*) guidelines, which noted that an effect size value ranging from .10 to .29 was considered a small correlation, a range from .30 to .49 was considered a moderate correlation, and a range from .50 to 1.0 was considered a large correlation (Cohen, 1992; Gravetter & Wallnau, 2009). The significance of the correlation coefficients were determined using alpha level. An alpha level of .05 or lower assumed that the correlation was significant.

Research Question 2. What is the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's socialemotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PCRI (Gerard, 1994) and CBCL/6-18 (Achenbach & Rescorla, 2001)?

A Pearson *r* correlation coefficient was used to determine the nature of the relationship between parental behaviors and children's social-emotional problems. It calculated the strength of the bivariate relationships between parental behaviors and children's social-emotional problems. The correlational analysis specifically examined the correlational scores between four areas of parental behaviors (parental support, involvement, communication, and limit setting; PCRI, Gerard, 1994) and two types of

children's social-emotional problems (internalizing and externalizing behavior problems; CBCL/6-18, Achenbach & Rescorla, 2001).

Significantly positive coefficients were indicative that more parental behaviors were related to more children's social-emotional problems or fewer parental behaviors were related to fewer children's social-emotional problems, while significantly negative coefficients were indicative that more parental behaviors were related to fewer children's social-emotional problems or fewer parental behaviors were related to more children's social-emotional problems.

The strength of the relationship between the variables were interpreted using Cohen's *d*, which noted that an effect size value ranging from .10 to .29 was considered a small correlation, a range from .30 to .49 was considered a moderate correlation, and range from .50 to 1.0 was considered a large correlation (Cohen, 1992; Gravetter & Wallnau, 2009). An alpha level of .05 or lower assumed that the correlation was significant.

Research Question 3. What is the extent to which parental behaviors (parental support, involvement, communication, and limit setting) mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF (Abidin, 2012), PCRI (Gerard, 1994), and CBCL/6-18 (Achenbach & Rescorla, 2001)?

A path analysis was used to determine the extent to which parental behaviors mediate the relationship between parental stress and children's social-emotional problems. The study variables were grouped into models (e.g., four areas of parental behaviors as mediators, parental stress as the independent variable, and two types of children's social-emotional problem as dependent variables) based on whether a significant correlation was found and were examined using path analysis. Additional variables such as demographic variables (e.g., household income, household government public assistance status, mother's employment status, mother's education level, mother's Hispanic origin, mother's age, single- and two-parent family, marital/relationship status, child's Hispanic origin, child's gender, child's age, child's grade, number of members living in the household, number of children living in the household, and recent life changes) were identified as possible covariates and controlled for in the analysis.

Unstandardized coefficients (*B*), standard errors (*SE*), and regression (R^2) values were calculated for each path model. An alpha level of .05 or lower assumed to be indicative of a statistically significant result. An alpha level of .05 or lower in a coefficient, in the indirect effect for each model, assumed to indicate whether an area of parental behaviors (mediator) in the model mediated the relationship between parental stress (independent variable) and a type of children's social-emotional problems (dependent variable). A significant indirect effect indicated that the direct effect between parental stress and a type of children's social-emotional problems were to be examined to determine whether an area of parental behavior in the model were partial or complete mediators of the relationship. If there was a significant alpha level of the coefficient for the direct effect, it was assumed that an area of parental behaviors in the model was a partial mediator. If there was no significant alpha level of the coefficient for the direct effect, it was assumed that an area of parental behaviors in the model was a complete mediator. If there was no significant alpha level of the coefficient for the direct effect, it was assumed that an area of parental behaviors in the model was a complete mediator. An alpha level of .05 or lower, in the regression (R^2) values for each demographic variable, indicated that when the covariates are controlled, the model explained the proportion of variance in the variables.

The results of each analysis was examined to determine (a) whether parental stress (total stress) were or were not related to children's social-emotional problems (internalizing and externalizing behavior problems), (b) whether parental behaviors (parental support, involvement, communication, and limit setting) were or were not related to children's social-emotional problems (internalizing and externalizing behavior problems), (c) the direct effect for parental stress on children's social-emotional problems through parental behaviors, and (d) the indirect effect was determined for each model whether an area of parental behaviors (parental support, involvement, communication, and limit setting) was or was not a mediator of the relationship between parental stress (total stress) and a type of children's social-emotional problems (internalizing and externalizing behavior problems). Models were grouped, based on whether a significant correlation was found, for four areas of parental behaviors [mediator] (parental support, involvement, communication, and limit setting), parental stress (independent variable; total stress score), and two types of children's social-emotional problems (dependent variable; internalizing and externalizing behavior problems). The results of the analysis for each research question was presented in Chapter 4.

Threats to Validity

The three instruments selected for this study had a high degree of validity and reliability and had been repeatedly tested for the generalizability of their outcomes. The greatest threat to the internal validity of the study was the need to select the participants from a limited regional population. Because of specific conditions that can impact populations in any regional group, this could result in outcomes that are not generalizable. In addition, the use of multiple language variations of the same testing instruments may be a limitation in relation to the outcomes and comparisons made in the study as a whole. This influenced the selection of the instruments because of research that identified their Spanish language versions as being representative of the English language version.

Internal Validity

To increase the internal validity of the study a standardized set of conditions were carried in the study. The study was limited to one, 50-minute interview session, where the participants completed the instruments. Three reliable instruments were used; the PSI-4-SF specifically assessed different aspects of stress related to parenting (Abidin, 2012; Byars et al., 2011); the PCRI assessed how parents view the process of parenting and how they perceive their own relationship with their child specifically parental support, involvement, communication, and limit setting (Gerard, 1994; Jacobsen, McKinney, & Hoick, 2014); and the CBCL/6-18 specifically assessed the absence or presence of internalizing and externalizing behavior problems (Achenbach & Rescorla, 2001; Mazefsky et al., 2011). The participants were not selected based on their level of education, intelligence, or age to prevent statistical regression errors. A priori power analysis was calculated to determine the sample size required for this study. The internal consistency of each instrument was analyzed using Cronbach's alpha. Assumption testing was conducted to screen the data for outliers, normality, linearity, and homoscedasticity. A one-way ANOVA analysis was conducted to control for testing effects by identifying the possible covariates to control for those covariates. To avoid bias responding participants were allowed to exclude themselves for the study.

External Validity

To increase the external validity of the study a standardized set of conditions were carried in the study. To prevent reactive effects a demographic questionnaire was administered. The demographic questionnaire measured the participant's eligibility to participate in the study and identify factors that may influence the parental behaviors and parental stress on children's social-emotional problems. To decrease the probability of selection bias, prior to consenting to the study participants were provided an eligibility criteria. Participants completed the study in a nonclinical and nonexperimental setting (i.e., public space) to limit the effects of the environment and complete the study in one sitting to reduce the testing effects of the study, on the participants; which may affect their responses. The identification of possible covariates and the analysis to control for those covariates allowed this study to be generalized to the target population.

Ethical Procedures

The ethics of this study was set according to the research purpose, authorization procedures, and the instructions were given to the research participants prior to their cooperation. The research was devised to be in total alignment with the standards of the South Texas school system and with Walden University Institutional Review Board (IRB). The IRB at Walden University granted approval of the study and provided approval number: 01-23-18-0172510 and expired on January 22, 2019. I was trustworthy without any intent to deceive, and clearly outlined the study purpose in the IRB documentation. I ensured that the study was free from prejudice, unfairness, and did not

breach participants' privacy and confidentiality. I did no harm in the conducting of the research and allowed participants to exit the study at any time without demonstration of malice. All of these elements were included in the disclosure statement that were provided to each of the participants of the study.

Participation in this study was voluntary and a small compensation was associated with a participant's participation in the study. Participants were free to accept or turn down the invitation and stop participation at any time during the study. Participants were informed that, only eligible participants (meet the eligibility criteria) will receive compensation and proceed in the study. Each participant was assigned with a unique ID number for confidentiality purposes. The study did not proceed until the participant read the informed consent. Each instrument took 10-15 minutes to complete.

Reports coming out of this study did not share the identities of participants. Details that might identify participants, such as the location of the study, also were not shared. I did not use the participant's personal information for any purpose outside of this research project. The data is kept secured by keeping all questionnaires, reports, surveys, and similar items locked in a secure lock box, password protecting data on the researcher's computer, and using an assigned ID number in place of names. The data will be kept for a period of at least 5 years, as required by the university. The data will be disposed by shredding documents and erasing electronic files.

Summary

The methodology presented focused on the exploration of potential causative factors that can influence poor outcomes for low SES Hispanic children. There were two distinct elements that were presented in this methodology: the exploration of the impact

of parental stress, and the potential mediating impact of prosocial parental behaviors. This was based on findings of researchers including Conger and Conger (2002), Leidy et al. (2012), McConnel et al. (2011), Puff and Renk (2014), White et al. (2015) that there was a high degree of resilience in the Hispanic community and that parental influences can have a positive impact on age-related developmental outcomes. This methodology provided a means of assessing the views of parents about their stress levels, their level of parental behavior (prosocial) and their perceptions of the developmental, social, and emotional capabilities of their children. The outcomes of this study could be used as a means of supporting measures to enhance positive parental behaviors in at-risk populations.

Chapter 4 Results

The purpose of this quantitative correlational study was to examine whether parental behaviors (parental support, involvement, communication, and limit setting) mediate the relationship between parental stress (total stress) and children's socialemotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families. Parental behaviors were measured by PCRI (Gerard, 1994), parental stress was measured by PSI-4 SF (Abidin, 2012), and children's socialemotional problems was measured by CBCL/6-18 (Achenbach & Rescorla, 2001). The study was guided by the following research questions and hypotheses.

Research Question 1: What is the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11?

 H_01 : Parental stress (total stress) will not relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF and CBCL/6-18.

 H_a 1: Parental stress (total stress) will relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF and CBCL/6-18.

Research Question 2: What is the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's socialemotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11? H_02 : Parental behaviors (parental support, involvement, communication, and limit setting) will not relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PCRI and CBCL/6-18.

 H_a2 : Parental behaviors (parental support, involvement, communication, and limit setting) will relate to children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PCRI and CBCL/6-18.

Research Question 3: What is the extent to which parental behaviors (parental support, involvement, communication, and limit setting) mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11?

 H_03 : Parental behaviors (parental support, involvement, communication, and limit setting) will not mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF, PCRI, and CBCL/6-18.

 H_a 3: Parental behaviors (parental support, involvement, communication, and limit setting) will mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF, PCRI, and CBCL/6-18.

SPSS version 25.0 statistical software was used to analyze the data. Chapter 4 presents a description of the data collection and the results for the data analyses. The details of the data collection are presented, including time frame for data collection and baseline descriptive and demographics. Next, the results of the data analyses are presented: a reliability analysis for each instrument, descriptive statistics for the sample, an evaluation for the statistical assumptions, one-way ANOVA analysis to identify covariates within the demographic variables, Pearson *r* correlation coefficient analysis to address Research Questions 1 and 2, and path analysis to address Research Question 3. Lastly, the chapter ends with a summary of the findings.

Data Collection

Time Frame and Recruitment

Within 5 months, 63 Hispanic mothers of children ages 6-11 identified as economically disadvantaged participated in this study. Mothers were recruited from an elementary school at a South Texas school district with children ages 6-11. They received an invitation letter sent with the child in a sealed envelope in both English and Spanish (Appendix G) sent out by the elementary school. The letter invited the consenting parent (mother) to contact me if she was interested in participating in the study. An incentive of \$5 was provided to all participants who participated in the study. The invitation letter was sent out five times in a 5-month period to recruit additional participants. The challenges encountered were minimal and were scheduling related. For example, many parents rescheduled interview sessions 3 or 4 times due to transportation, daycare issues, and other personal issues.

Baseline Descriptive and Demographics

All of the participants were identified as low socioeconomic Hispanic, Latino, or Spanish origin mothers with a child of 6-11 years of age attending school, mothers living with the child, and child identified as economically disadvantage (qualify for free or reduced school lunches) in Hidalgo County. Hidalgo County is located in the southernmost tip of South Texas, near the Mexican border. The sample population is representative of the 91% Hispanic population in Hidalgo County of which 36% are living below the poverty level and 15.8% are children ages 6-11 and 25% of Hispanic households are headed by mothers of which 12% are living below the poverty level (U.S. Census Bureau, 2015a, 2015b, 2015c, 2015d). Although Hispanics are the fastest growing population in this country, along with Hispanic children living in poverty, the documented Hispanic population in Texas is only 39.4% (U.S. Census Bureau, 2017).

Results of Data Analyses

Reliability analysis for each instrument, descriptive statistics for the sample and results, Pearson r correlation analysis, and path analysis are discussed in this section. A Cronbach's alpha was calculated for each instruments' scale (PSI-4-SF – total stress scale, Abidin, 2012; PCRI – parental support, involvement, communication, and limit setting scales, Gerard, 1994; CBCL/6-18 – internalizing and externalizing behavior problems scales, Achenbach & Rescorla, 2001). Frequencies and percentages were calculated for the demographic variables (such as household income, household government public assistance status, etc.). The means and standard deviations for the study variables were also calculated: parental behaviors – parental support, involvement, communication, and limit setting (PCRI, Gerard, 1994), parental stress – total stress score
(PSI-4-SF, Abidin, 2012), and children's social-emotional problems – internalizing and externalizing behavior problems (CBCL/6-18, Achenbach & Rescorla, 2001). A oneway ANOVA was conducted with the demographic variables and the parental behaviors –parental support, involvement, communication, and limit setting (PCRI, Gerard, 1994), parental stress – total stress score (PSI-4-SF, Abidin, 2012), and children's socialemotional problems – internalizing and externalizing behavior problems (CBCL/6-18, Achenbach & Rescorla, 2001). A Pearson *r* correlation analysis was also conducted with parental behavior (parental support, involvement, communication, and limit setting), parental stress (total stress), and children's social-emotional problem (internalizing and externalizing behavior problems). Finally, a path analysis was conducted with parental stress (total stress), children's social-emotional problem (externalizing behavior problems), and identified demographic covariate variables (household income, single-and two-parent family [household], child's age, and recent life changes).

Instrument Reliability

A Cronbach's alpha was calculated to determine the internal consistency for the total stress scale (PSI-4-SF, Abidin, 2012), parental support, involvement, communication, and limit setting scales (PCRI, Gerard, 1994), and internalizing and externalizing behavior problem scales (CBCL/6-18, Achenbach & Rescorla, 2001). The Cronbach's alpha can range between 0 and 1.0; where > .9 excellent, > .8 good, > .7 acceptable, > .6 questionable, > .5 poor, and \leq .5 unacceptable (George & Mallery, 2016). The Cronbach's alpha coefficients for all scales indicated acceptable levels of internal consistency (see Table 1). The PSI-4-SF – total stress (.940) and CBCL/6-18 –

externalizing behavior problem (.937) scales indicated excellent internal consistency. The PCRI – parental support (.815), involvement (.891), and limit setting (.875) scales indicated good internal consistency. The PCRI – communication (.784) and CBCL/6-18 – internalizing behavior problem (.797) scales indicated acceptable internal consistency. Table 1.

Scale	No. of Items	α
PCRI - Parental Support	9	.815
PCRI – Involvement	14	.891
PCRI – Communication	9	.784
PCRI - Limit Setting	12	.875
CBCL/6-18 - Internalizing Behavior Problems	32	.797
CBCL/6-18 -Externalizing Behavior Problems	35	.937
PSI-4-SF - Total Stress	36	.940

Cronbach's Reliability for Instrument Scales

Note. Acceptable internal consistency alpha value 0.70+

Assumptions

The data were screened to identify and review assumptions of skewness, kurtosis, outliers, normality, linearity, and homoscedasticity. First, skewness and kurtosis were examined (see Table 4). To determine normal distribution in the variables, parameter of ± 2 for skewness and ± 3 for kurtosis were used as acceptable ranges. Variables with greater ranges than ± 2 in skewness in the variable were considered to be asymmetrical about its mean, and variables greater than ± 3 the variable were considered different than a normal distribution, which has the propensity to produce outliers (Westfall & Henning, 2013). The variables revealed skewness and kurtosis to be evenly distributed except for internalizing behavior problems. The skewness value of 2.33 and kurtosis value of 6.50

indicated that mothers' responses regarding their child's internalizing behavior problems deviated from a normal distribution.

Next, one-way ANOVA assumptions were examined for normality, homoscedasticity, and outliers. Normality was assessed using a Q-Q scatterplot to compare the distribution of the residuals with a normal distribution assumed (see Figures 2 through 5). The solid line represented in the Q-Q scatterplot characterizes the theoretical quantiles of a normal distribution. The points in the Q-Q scatterplot appear to form a relatively straight line, as assessed by visual inspection. Therefore, normality can be assumed among the variables except between involvement, child's age, and child's gender; externalizing behavior problems and income normality maybe violated; and internalizing behavior problems and mother's age normality appears to be violated. The violation of normality can be limited when interpreting results.



Figure 2. Q-Q scatterplot testing normality among parental support, household, and recent life changes.



Figure 3. Q-Q scatterplot testing normality among involvement, child's age, and child's grade.



Figure 4. Q-Q scatterplot testing normality among internalizing behavior problems and mother's age.



Figure 5. Q-Q scatterplot testing normality among externalizing behavior problems and income.

Homoscedasticity was assessed by plotting the residuals against the predicted values (see Figures 6 through 9). The points appear randomly distributed with a mean of 0 and no apparent curvature, as assessed by visual inspection. Therefore, the assumption of homoscedasticity was met.



Figure 6. Residuals scatterplot testing homoscedasticity among parental support, household, and recent life changes.



Figure 7. Residuals scatterplot testing homoscedasticity among involvement, child's age, and child's grade.



Figure 8. Residuals scatterplot testing homoscedasticity among internalizing behavior problems and mother's age.



Figure 9. Residuals scatterplot testing homoscedasticity among externalizing behavior problems and income.

Studentized residuals were calculated and the absolute values were plotted against the observation numbers to identify influential points (see Figures 10 through 13). The model residuals were divided by the estimated residual standard deviation to calculate for studentized residuals. To have significant influence on the results of the model the studentized residuals greater than 3.23 in absolute value, the .999 quartile of a *t* distribution with 62 degrees of freedom were considered. Points with a studentized residual greater than three were specified with observation numbers next to each point. Assessed by visual inspection, none of the observations scored greater than 3.23 except between internalizing behavior problems and mother's age with a studentized residual of 5.0. No data entry errors were detected, as raw scores for each case were within the range of possible scores for each variable. The data analyses were conducted with and without the outliers and the results did not change. Therefore, the outliers were included in the data analyses.



Figure 10. Studentized residuals plot for outlier detection among parental support, household, and recent life changes.



Figure 11. Studentized residuals plot for outlier detection among involvement, child's age, and child's grade.



Figure 12. Studentized residuals plot for outlier detection among internalizing behavior problems and mother's age.



Figure 13. Studentized residuals plot for outlier detection among externalizing behavior problems and income.

Then, a Pearson *r* correlation assumption was examined for Research Question 1 (see Figure 14) and Research Question 2 (see Figure 15). The assumption of linearity, the relationship between each pair of variables needed to be linear (Conover & Iman, 1981). This assumption is violated if there is curvature among the points on the scatterplot between any pair of variables. There appeared to be no curvature among the points on the scatterplot between any pair of variables. Therefore, a linear relationship existed between each pair of variables for Research Question 1 and 2. Outliers were detected between the variables paired with internalizing behavior problems. No data entry errors were detected, as raw scores for each case were within the range of possible scores for each variable. The data analyses were analyzed with and without the outliers and the results did not change. Therefore, the outliers were included in the data analyses.



Figure 14. Scatterplot matrix among internalizing behavior problems (CBCL_INT), externalizing behavior problems (CBCL_EXT), and total stress (PSI_TSTRESS).



Figure 15. Scatterplot matrix among parental support (PCRI_SUP), involvement (PCRI_INV), communication (PCRI_COM), limit setting (PCRI_LIM), internalizing behavior problems (CBCL_INT), and externalizing behavior problems (CBCL_EXT).

Lastly, a path analysis was used to examine Research Question 3 using bootstrapping to test each of the mediation models. The use of bootstrapping, to test each of the mediation models, does not require that the underlying distributional assumptions are met. "Bootstrapping better respects the irregularity of the sampling distribution, as a result yield inferences that are more likely to be accurate than when the normal theory approach is used" (Hayes, 2018, p. 98). Therefore, assumptions were not examined.

Descriptive Analyses

The sample consisted of 63 mothers that responded to a demographic questionnaire prior to accessing the comprised instruments and descriptive statistics were calculated for the mothers' (see Table 2) and children's (see Table 3) demographic characteristics.

Descriptive statistics for mothers' demographic characteristics. Participants reported they were mothers of Hispanic, Latino, or Spanish Origin; Mexican American (n = 30, 47.62%) and Mexican (n = 33, 52.38%) and approximately half were English (n = 35, 55.56%) speaking mothers. Most mothers were 46 and older (n = 16, 25.40%) and most were married (n = 28, 44.44%). Nearly half of the mothers reported their highest level of education achieved as high school or GED (n = 30, 47.62%) and most were employed (n = 36, 57.14%). Roughly half of the mothers are living in single-parent family (n = 33, 52.38%) households. The household income ranged from under \$5,000 to \$25,000 which most had an income of 15,001-20,000 (n = 25, 39.68%). All mothers reported to receiving government public assistance, such as TANF and/or SNAP (n = 63, 100%) and most responded to experiencing recent life changes (n = 39, 61.91%). Many of the mothers reported that 5 to 6 members (n = 26, 41.27%) are living in the household. Table 2.

Variable	п	%
Mother's Primary Language		
English	35	55.56
Spanish	28	44.44
Mother's Hispanic, Latino, or Spanish Origin		
Mexican American	30	47.62

Descriptive Statistics for Mothers' Demographic Characteristics (N = 63)

Mexican	33	52.38
Mother's Age		
20-30 years	13	20.64
31-35 years	8	12.70
36-40 years	14	22.22
41-45 years	12	19.05
46 and older	16	25.40
Marital Status		
Single (never married)	23	36.51
Married	28	44.44
Other (Separated, Divorced)	12	19.05
Education		
Elementary School	9	14.29
Middle School	7	11.11
High School (no diploma)	8	12.70
High School or GED (diploma)	30	47.62
Some college or Higher (Technical/Trade, 2- & 4- yr. degree)	9	14.29
Employment		
Unemployed	11	17.46
Employed	36	57.14
Homemaker	16	25.40
Household		
Single-parent family	33	52.38
Two-parent family	30	47.62
Income		
Under \$5,000	7	11.11
\$5,001-10,000	17	26.98
\$10,001-15,000	8	12.70
15,001-20,000	25	39.68
\$20,001-25,000	6	9.52
Receives Government Public Assistance (SNAP, TANF)	63	100
Recent Life Changes		
No, Recent Life Changes	24	38.10
Yes, Recent Life Changes	39	61.91

Members Living in Household		
1-2 members	4	6.35
3-4 members	22	34.92
5-6 members	26	41.27
7+ members	11	17.46

Note. Due to rounding errors, percentages may not equal 100%

Descriptive statistics for children's demographic characteristics. Mothers reported demographic characteristics for their children (see Table 3). All children were reported to be Mexican American (n = 63, 100%) of which 32 were females (50.79%) and 31 were males (49.21%). Many of the mothers reported to having 3 to 4 children (n = 31, 49.21%) living in the household. Children's age ranged from 6-7 years old (n = 17, 26.98%), 8-9 years old (n = 24, 38.10%), and 10-11 years old (n = 22, 34.92%) and most were in the 5th grade (n = 21, 33.33%).

Table 3.

Descriptive Statistics for Children's Demographic Characteristics (N = 63)

Variable	п	%
Children Living in Household		
1-2 children	23	36.51
3-4 children	31	49.21
5+ children	9	14.29
Child's Hispanic, Latino, or Spanish Origin		
Mexican American	63	100
Child's Gender		
Female	32	50.79
Male	31	49.21
Child's Age		
6-7 years	17	26.98
8-9 years	24	38.10
10-11 years	22	34.92

Child's Grade		
1st grade	9	14.29
2nd grade	8	12.70
3rd grade	15	23.81
4th grade	10	15.87
5th grade	21	33.33

Note. Due to rounding errors, percentages may not equal 100%.

Descriptive statistics for study variables. Mothers responded to three instruments regarding their stress related to parenting (PSI-4-SF, Abidin, 2012), how they view the process of parenting and how they perceive their own relationship with their child (PCRI, Gerard, 1994) and the absence or presence of behavioral and emotional problems (CBCL/6-18, Achenbach & Rescorla, 2001). The mean, standard deviation, and standard error of the mean were calculated for study variables: parental support, involvement, communication, and limit setting (parental behaviors; PCRI, Gerard, 1994); total stress (parental stress; PSI-4-SF, Abidin, 2012); and internalizing and externalizing behavior problems (children's social-emotional problems; CBCL/6-18, Achenbach & Rescorla, 2001; See Table 4). Mothers' total stress had an average of 92.30 (SD = 21.25, $SE_M = 2.68$, Min = 56.00, Max = 147.00).

Of the four parental behaviors reported on the PCRI (parental support, involvement, communication, and limit setting), mothers had the highest mean score on involvement. This is consistent with previous literature that suggests Hispanic families rely on positive practices such as positive involvement (Holtrop et al., 2015; Hill, 2006; Leidy et al., 2012). Involvement score had an average of 40.75 (SD = 6.45, $SE_M = 0.813$, Min = 24.00, Max = 54.00). Limit setting score had an average of 28.94 (SD = 5.88, SE_M = 0.741, Min = 15.00, Max = 40.00). Communication score had an average of 25.40 (SD = 3.51, SE_M = 0.442, Min = 17.00, Max = 32.00). Parental support had an average of 21.73 (SD = 4.14, SE_M = 0.521, Min = 14.00, Max = 31.00).

Of the two children's social-emotional problem reported on the CBCL/6-18 (internalizing and externalizing behavior problems), children had the highest mean score on externalizing behavior problems. This is consistent with previous literature that suggest that children in low socioeconomic families increases the risk for externalizing problems (Gonzales et at., 2011; Lee et al., 2011; Lee et al., 2013; Reising et al., 2013). Externalizing behavior problems had an average of 10.71 (SD = 11.07, $SE_M = 1.40$, Min = 0.00, Max = 46.00). Internalizing behavior problems had an average of 3.16 (SD =4.15, $SE_M = 0.523$, Min = 0.00, Max = 22.00).

Table 4.

Descriptive Statistics for Study Variables: Parental Behaviors, Parental Stress, and Children's Social-Emotional Problem

Variable	М	SD	п	SE_M	Skewness	Kurtosis
Parental Support	21.73	4.14	63	0.521	-0.037	-0.681
Involvement	40.75	6.45	63	0.813	-0.395	0.074
Communication	25.40	3.51	63	0.442	-0.585	0.384
Limit Setting	28.94	5.88	63	0.741	-0.136	-0.557
Internalizing Behavior Problems	3.16	4.15	63	0.523	2.33*	6.50*
Externalizing Behavior Problems	10.71	11.07	63	1.40	1.32	1.25
Total Stress	92.30	21.25	63	2.68	0.464	-0.457

Note. Due to rounding errors, percentages may not equal 100%

 $*>\pm 2$ skewness and $>\pm 3$ kurtosis, not normally distributed

Preliminary Analyses

A one-way ANOVA analysis was conducted to determine which demographic

variables had significant associations with study variables. Two demographic variables

(government public assistance and all children are Mexican American) were excluded from analysis as all participants met that category. The effect size of the association between groups was interpreted using Cohen's (1992) guidelines: .10 a small association, .25 a moderate association, and .40 a large association. The high number of tests conducted, an alpha correction was applied to control for Type 1 errors. Therefore, only p values below .01 were considered statistically significant. Post hoc paired *t*-tests were calculated between each pair of measurements, that were significant based on the ANOVA analysis, to further examine the differences among the variables with more than 3 categories. Few demographic variables were significantly associated with study variables with small associations (see Table 5).

Table 5.

Demographic Variables	Parental Behaviors			Parental Stress	Child Soc Emot Prob	ren's ial- ional lems	
	SUP	INV	COM	LIM	TSTRESS	INT	EXT
Mother's Hispanic Origin	1.98	1.97	1.52	1.57	.109	2.31	1.03
Mother's Age	.476	.763	1.14	1.04	.715	4.42**	1.14
Marital Status	3.43	.445	1.02	.266	.514	.541	.171
Education	.154	1.18	1.54	.392	.479	1.12	1.40
Employment	.798	.053	.563	.735	.847	1.62	1.33
Household	9.37**	1.00	1.03	.586	.009	3.27	.022
Income	.903	.840	.352	.807	1.13	.681	3.71**
Recent Life Changes	10.18**	2.81	1.69	1.49	4.98	2.07	2.70
Members Living in Household	.094	2.00	.256	.122	.295	3.45	1.64
Children Living in Household	1.85	.559	.316	.642	.500	.536	2.50
Child's Gender	.025	1.30	1.21	6.01	4.88	.836	4.21

Associations Between Demographic Variables and Parental Behaviors, Parental Stress, and Children's Social-Emotional Problems (N=63)

Child's Age	.870	7.24**	2.64	.124	2.05	.109	3.27
Child's Grade	.801	4.44**	1.78	1.32	1.29	.169	1.65

Note. **p* > .01, ***p* > .001

TSTRESS – Total Stress, SUP – Parental Support, INV – Involvement, COM – Communication, LIM – Limit Setting, INT – Internalizing, EXT - Externalizing

Household and parental support were significant, F(1, 61) = 9.37, p = .003 (see Table 6). Households with two-parent families had significantly higher parental support than those in single-parent families (see Table 7). The eta squared was 0.133 indicating Household explains approximately 13% of the variance in parental support.

Recent life changes and parental support were significant, F(1, 61) = 10.18, p = .002 (see Table 6). Households with no recent life changes had significantly higher parental support than those with recent life changes (see Table 7). The eta squared was 0.143 indicating recent life changes explains approximately 14% of the variance in parental support.

Table 6.

Variable Groups	SS	df	F	р	η_p^2
Household					
Between Groups	141.14	1	9.37	.003	0.133
Within Groups	919.27	61			
Recent Life Changes					
Between Groups	151.71	1	10.18	.002	0.143
Within Groups	908.70	61			

Analysis of Variance for Parental Support by Household and Recent Life Changes

Table 7.

Mean, Standard Deviation, and Sample Size for Parental Support by Household and Recent Life Changes

Variable Combinations	M	SD	n
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Household			
Single-parent family	20.30	3.62	33
Two-parent family	23.30	4.15	30
Recent Life Changes			
No, Recent Life Changes	23.71	3.52	24
Yes, Recent Life Changes	20.51	4.05	39

Child's age and parental involvement were significant, F(2, 60) = 7.24, p = .002(see Table 8). Children ages 6-7 had significantly higher parental involvement than those 8-9 years or 10-11 years (see Table 9). The eta squared was 0.194 indicating child's age explains approximately 19% of the variance in parental involvement. The mean of parental involvement for 6-7 years-old (M = 44.24, SD = 4.72) was significantly larger than for 10-11 years-old (M = 37.18, SD = 6.99), p = .001. The mean of parental involvement for 8-9 years-old (M = 41.54, SD = 5.50) was significantly larger than for 10-11 years-old (M = 37.18, SD = 6.99), p = .039.

Child's grade and parental involvement were significant, F(4, 58) = 4.44, p = .003(see Table 8). Children in 2nd grade had significantly higher parental involvement than those in 1st, 3rd, 4th, or 5th grade (see Table 9). The eta squared was 0.235 indicating child's grade explains approximately 24% of the variance in parental involvement. The mean of parental involvement for 5th graders (M = 36.76, SD = 6.87) was significantly smaller than for 1st graders (M = 43.44, SD = 5.50; p = .043), 2nd graders (M = 45.13, SD = 3.83; p = .009), and 3rd graders (M = 42.60, SD = 6.07; p = .035).

Table 8.

Analysis of Variance for Involvement by Child's Age and Child's Grade

Variable Groups	SS	df	F	р	η_p^2
Child's Age					

Between Groups Within Groups	501.65 2078.29	2 60	7.24	.002	0.194
Child's Grade					
Between Groups	605.03	4	4.44	.003	0.235
Within Groups	1974.91	58			

Table 9.

Mean, Standard Deviation, and Sample Size Involvement by Child's Age and Child's Grade

Variable Combinations	М	SD	п
Child's Age			
6-7 years	44.24	4.72	17
8-9 years	41.54	5.50	24
10-11 years	37.18	6.99	22
Child's Grade			
1st grade	43.44	5.50	9
2nd grade	45.13	3.83	8
3rd grade	42.60	6.07	15
4th grade	40.40	4.35	10
5th grade	36.76	6.87	21

Mother's age and internalizing behavior problems were significant, F(4, 58) =4.42, p = .003 (see Table 10). Mothers ages 31-35 had children with significantly higher levels of internalizing behavior problems than those 20-30 years and 35 and older (see Table 11). The eta squared was 0.234 indicating mother's age explains approximately 23% of the variance in internalizing behavior problems. The mean of internalizing behavior problems for 31-35 years-old (M = 7.00, SD = 6.23) was significantly larger than for 36-40 years-old (M = 1.64, SD = 2.37; p = .017) and for 46 and older (M = 1.56, SD = 1.32 p = .012). Table 10.

Analysis of Variance for Internalizing Behavior Problems by Mother's Age

Variable Groups	SS	df	F	р	η_p^2
Mother's Age					
Between Groups	249.78	4	4.42	.003	0.234
Within Groups	818.63	58			

Table 11.

Mean, Standard Deviation, and Sample Size Internalizing Behavior Problems by Mother's Age

Variable Combinations	М	SD	п
20-30 years	2.46	2.93	13
31-35 years	7.00	6.23	8
36-40 years	1.64	2.37	14
41-45 years	5.25	5.59	12
46 years and older	1.56	1.32	16

Household income and externalizing behavior problems were significant, F(4, 58) = 3.71, p = .009 (see Table 12). Households with income under \$5,000 had children with significantly higher levels of externalizing behavior problems than those with an income \$5,001 and higher (see Table 13). The eta squared was 0.204 indicating household income explains approximately 20% of the variance in externalizing behavior problems. The mean for externalizing behavior problems for 15,001-20,000 (M = 8.56, SD = 8.95) was significantly smaller than for income under \$5,000 (M = 24.14, SD = 17.05), p = .006. The mean for externalizing behavior problems for income under \$5,000 (M = 24.14, SD = 17.05) was significantly larger than for \$5,001-10,000 (M = 10.71, SD = 10.07, p = .038) and \$10.001-15,000 (M = 6.13, SD = 5.92; p = .010).

Table 12.

Analysis of Variance for Externalizing Behavior Problems by Income

Variable Groups	SS	df	F	р	${\eta_p}^2$
Income					
Between Groups	1548.60	4	3.71	.009	0.204
Within Groups	6052.25	58			

Table 13.

Mean, Standard Deviation, and Sample Size for Externalizing behavior Problems by Income

Variable Combinations	M	SD	п
Under \$5,000	24.14	17.05	7
\$5,001-10,000	10.71	10.07	17
\$10.001-15,000	6.13	5.92	8
15,001-20,000	8.56	8.95	25
\$20,001-25,000	10.17	10.19	6

Research Question 1

What is the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF (Abidin, 2012) and CBCL/6/18 (Achenbach & Rescorla, 2001)?

To assess Research Question 1, a Pearson *r* correlation coefficient was calculated to determine the relationship between parental stress (total stress score; PSI-4-SF, Abidin, 2012) and two types of children's social-emotional problems (internalizing and externalizing behavior problems; CBCL/6-18, Achenbach & Rescorla, 2001; see Table 14). The positive coefficients indicate a positive relationship between the variables (the larger parental stress coefficient becomes, the larger children's social-emotional problems coefficient become or the smaller parental stress coefficient becomes, the smaller children's social-emotional problems coefficient become). In contrast negative coefficients indicate a negative relationship (the larger parental stress coefficient become or the smaller children's social-emotional problems coefficient become or the smaller parental stress coefficient becomes, the larger children's social-emotional problems coefficient become or the smaller parental stress coefficient becomes, the larger children's social-emotional problems coefficient become). Cohen's (1992) guidelines was used to evaluate the strength of the relationship between the variables, where coefficients between .10 and .29 represented a small correlation, coefficients between .30 and .49 represented a moderate correlation, and coefficients between .50 to 1.0 represented a large correlation. A p value of .05 or lower was used to assume that the correlation was significant.

A significant positive correlation was observed between parental stress and externalizing behavior problems (r = .700, p < .001). The correlation coefficient between parental stress and externalizing behavior problems was .700, indicating a large correlation effect. This indicates that as parental stress increases, externalizing behavior problems tend to increase or that as externalizing behavior problems tend to increase, parental stress increased as well. There was no significant correlation between parental stress and internalizing behavior problems (r = .012, p = .924).

Table 14.

Parental Stress	Children's Social-E	Children's Social-Emotional Problems				
Falental Suess	Internalizing	Externalizing				
Total Stress	.012	.700*				
<i>Note.</i> * <i>p</i> < .001						

Pearson Correlation Among Parental Stress and Children's Social-Emotional Problems

Research Question 2

What is the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PCRI (Gerard, 1994) and CBCL/6-18 (Achenbach & Rescorla, 2001)?

To assess Research Question 2, a Pearson r correlation coefficient was calculated to determine the relationship between four types of parental behaviors parental support, involvement, communication, and limit setting; PCRI; Gerard, 1994) and two types of children's social-emotional problems (internalizing and externalizing behavior problems; CBCL/6-18, Achenbach & Rescorla, 2001; see Table 15). As in the previous analysis for Research Question 1, Cohen's (1992) guidelines was used to evaluate the strength of the relationship between the variables and a p value of .05 or lower was used to assume that the correlation was significant.

A significant negative correlation was observed between parental support and externalizing behavior problems (r = -.557, p < .001). The correlation coefficient between parental support and externalizing behavior problems was -.557, indicating a large correlation effect. This indicates that as parental support increases, externalizing behavior problems tend to decrease or that as externalizing behavior problems tend to decreased.

A significant negative correlation was observed between parental involvement and externalizing behavior problems (r = -.578, p < .001), indicating that as parental involvement increases, externalizing behavior problems decrease or that as externalizing behavior problems tend to decrease, parental involvement increased. The correlation coefficient between parental involvement and externalizing behavior problems was -.578, indicating a large correlation effect.

A significant negative correlation was observed between communication and externalizing behavior problems (r = -.495, p < .001). The correlation coefficient of -.495 indicates a moderate correlation effect. This correlation indicates that as communication increases, externalizing behavior problems tend to decrease or that as externalizing behavior problems tend to decrease, communication increased.

A significant negative correlation was also observed between limit setting and externalizing behavior problems (r = -.636, p < .001), indicating that as limit setting increases, externalizing behavior problems tends to decrease or that as externalizing behavior problems tend to decrease, limit setting increased. In this case, the correlation coefficient of -.636 is a large correlation effect.

There was no significant correlation between internalizing behavior problems and parental support (r = .228, p = .072), involvement (r = .009, p = .946), communication (r = .227, p = .074), and limit setting (r = .088, p = .491).

Table 15.

Pearson Correlation Among Parental Support, Parental Involvement, Communication, Limit Setting, Internalizing Behavior Problems, and Externalizing Behavior Problems

Parantal Pahaviara	Children's Social-Emotional Prob			
ratental Denaviors	Internalizing	Externalizing		
Parental Support	.228	557*		
Involvement	.009	578*		
Communication	.227	495*		
Limit Setting	.088	636*		

Note. **p* < .001

Research Question 3

What is the extent to which parental behaviors (parental support, involvement, communication, and limit setting) mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11 measured by the PSI-4-SF (Abidin, 2012), PCRI (Gerard, 1994), and CBCL/6-18 (Achenbach & Rescorla, 2001)?

A path analysis was conducted to assess Research Question 3 to determine which parental behaviors mediate the relationship between parental stress and children's socialemotional problems. Study variables were grouped in four models on the basis of the correlation analysis; four areas of parental behaviors (parental support, involvement, communication, and limit setting) as mediators, parental stress (total stress) as the independent variable, and one type of children's social-emotional problem (externalizing behavior problems) as dependent variables (see Table 16). Additional six demographic variables (household income, mother's age, single- and two-parent family [household], child's age, child's grade, and recent life changes) were identified as covariates. However, mother's age was associated with internalizing behavior problems, which no correlation was found in the correlation analysis. Child's grade offers redundant information with Child's age. Thus, a total of four covariates (household income, singleand two-parent family [household], child's age, and recent life changes) were controlled for in the path analysis. The controlled covariates explain the proportion of variance in the mediator variables.

Table 16.

Summary of Mediation Models

Model	DV	IV	М	Covariates
1	Externalizing	Parental Stress	Parental Support	Income, Household, Child's Age, Recent Life Changes
2	Externalizing	Parental Stress	Involvement	Income, Household, Child's Age, Recent Life Changes
3	Externalizing	Parental Stress	Communication	Income, Household, Child's Age, Recent Life Changes
4	Externalizing	Parental Stress	Limit Setting	Income, Household, Child's Age, Recent Life Changes

A path analysis method was used to test the conceptual mediation model (see Figure 16). In this analysis, the a path is the association between the independent variable (X) and the mediator (M); the b path is the association between the mediator and the dependent variable (Y). The c' path is the direct effect between X and Y. The indirect (mediation) effect is defined as the product of the a and b paths. Regression coefficients are derived for the paths in the model and percentile-corrected bootstrapped estimates are used to derive the indirect effect (Hayes, 2012). A statistically significant indirect effect is inferred by confidence intervals that do not straddle zero. The direct effect indicates the relationship between parental stress and externalizing behavior problems (significance effect assumes partial mediator and no significant indirect effect indicates that an area of parental behaviors mediates the relationship between parental stress and externalizing behavior problem. Multiple mediation analysis was conducted on

externalizing behavior problems (dependent variable), thus increasing the likelihood of a Type I error. Therefore, an alpha correction (bonferroni correction) was applied to control for Type 1 errors, only *p* values below .0125 were considered statistically significant.



Figure 16. Conceptual mediation model.

Model 1: Parental Support Mediator. The first model tested the relationship between parental stress and externalizing behavior problems, mediated by parental support. Table 17 demonstrates the unstandardized coefficients (*B*), standard errors (*SE*), and regression (R^2) values, along with the covariates. The results are depicted as a path diagram in Figure 17. The overall model was statistically significant, *F*(6, 56) = 12.80, *p* < .0001, R^2 = .578. The model significantly contributed 59% of the variance in parental support. There was a significant association between parental stress and parental support (*a* path); for each unit increase in parental stress, parental support decreased by .133 units (*B* = -.133, *SE* = 0.15, *p* < .0001). There was not a significant association between parental support and externalizing behavior problems (*b* path; *B* = -.401, *SE* = .426, *p* = .351). The direct effect (*c* ' path) between parental stress and externalizing behavior problems was statistically significant; for each unit increase in parental stress, externalizing behavior problems increased by .284 units (B = .284, SE = .075, p = .0004). The indirect effect was not statistically significant, indicating that parental support did not mediate the relationship between parental stress and externalizing behavior problems (B = .053, SE = .061, 95% CI = -.047, .194).

Table 17.

Path Analysis for Parental Stress Predicting Externalizing Behavior Problems, Mediated by Parental Support

Path	Description of Path	В	SE	t	р	LLCI	ULCI
а	Parental Stress on Parental Support	133	.015	-8.75	<.0001*	164	103
b	Parental Support on Externalizing	401	.426	941	.351	-1.26	.453
<i>c</i> ' (Direct effect)	Parental Stress on Externalizing	.284	.075	3.79	.0004*	.134	.434
Indirect effect (<i>ab</i>)	Parental Stress on Externalizing, through Parental Support	.053	.061			047	.194
Household		2.41	2.28	1.06	.295	-2.16	6.99
Income		-2.26	.797	-2.84	.006*	-3.86	667
Recent Life Cha	inges	501	2.17	231	.818	-4.84	3.84
Child's Age		1.90	1.27	1.50	.140	643	4.44

Note. *p < .0125 or lower. CI = confidence interval; LL = lower limit, UL = upper limit



Figure 17. Path Model 1 diagram for parental stress predicting externalizing behavior problems with parental support as a mediator (n = 63).

Note. Results represent unstandardized coefficients (*B*), along with standard errors (*SE*) in parentheses and regression (R^2) value. *p < .0125 or lower

Model 2: Involvement Mediator. The second model tested the relationship between parental stress and externalizing behavior problems, mediated by parental involvement. Table 18 demonstrates the unstandardized coefficients (*B*), standard errors (*SE*), and regression (R^2) values, along with the covariates. The results are depicted as a path diagram in Figure 18. The overall model was statistically significant, *F*(6, 56) = 12.95, *p* < .0001, R^2 = .581. The model significantly contributed 58% of the variance in parental involvement. There was a significant association between parent stress and involvement (*a* path); for each unit increase in parental stress, involvement decreased by .160 units (*B* = -.160, *SE* = .030, *p* < .0001).

There was not a significant association between involvement and externalizing behavior problems (*b* path; B = -.239, SE = .213, p = .268). The direct effect (*c*' path) between parental stress and externalizing behavior problems was statistically significant; for each unit increase in parental stress, externalizing behavior problems increased by .299 units (B = .299, SE = .060, p < .0001). The indirect effect was not statistically significant, indicating that involvement did not mediate the relationship between parental stress and externalizing behavior problems (B = .038, SE = .044, 95% CI = -.032, .137).

Table 18.

Results of Path Analysis for Parental Stress Predicting Externalizing Behavior Problems, Mediated by Involvement

Path	Description of Path	В	SE	t	р	LLCI	ULCI
а	Parental Stress on Involvement	160	.030	-5.29	<.0001*	221	100
b	Involvement on Externalizing	239	.213	-1.12	.268	666	.189
c'	Parental Stress on Externalizing	.299	.060	5.02	<.0001*	.180	.418

(Direct effect)							
Indirect effect (<i>ab</i>)	Parental Stress on Externalizing, through Involvement	.038	.044			032	.137
Household		1.60	1.94	.823	.415	-2.30	5.49
Income		-2.11	.806	-2.62	.011*	-3.73	497
Recent Life Changes		085	2.07	041	.967	-4.23	4.06
Child's Age		1.33	1.37	.969	.337	-1.42	4.08

Note. *p < .0125 or lower. CI = confidence interval; LL = lower limit, UL = upper limit



Figure 18. Path Model 2 diagram for parental stress predicting externalizing behavior problems with involvement as a mediator (n = 63).

Note. Results represent unstandardized coefficients (*B*), along with standard errors (*SE*) in parentheses and regression (R^2) value. *p < .0125 or lower

Model 3: Communication Mediator. The third model tested the relationship between parental Stress and externalizing behavior problems, mediated by communication. Table 19 demonstrates the unstandardized coefficients (*B*), standard errors (*SE*), and regression (R^2) values, along with the covariates. The results are depicted as a path diagram in Figure 19. The overall model was statistically significant, $F(6, 56) = 12.67, p < .0001, R^2 = .576$. The model significantly contributed 58% of the variance in communication. There was a significant association between parental stress and communication (*a* path); for each unit increase in parental stress, communication decreased by .094 units (B = -.094, SE = .019, p < .0001). There was not a significant association between communication and externalizing behavior problems (*b* path; B = -.260, SE = .351, p = .463). The direct effect (*c*' path) between parental stress and externalizing behavior problems was statistically significant; for each unit increase in parental stress, externalizing behavior problems increased by .313 units (B = .313, SE = .059, p < .0001). The indirect effect was not statistically significant, indicating that communication did not mediate the relationship between parental stress and externalizing behavior problems (B = .024, SE = .040, 95% CI = -.051, .109).

Table 19.

Results of Path Analysis for Parental Stress Predicting Externalizing Behavior Problems, Mediated by Communication

Path	Description of Path	В	SE	t	р	LLCI	ULCI
а	Parental Stress on Communication	094	.019	-5.07	<.0001*	131	057
b	Communication on Externalizing	260	.351	739	.463	963	.444
<i>c</i> ' (Direct effect)	Parental Stress on Externalizing	.313	.059	5.30	<.0001*	.195	.431
Indirect effect (<i>ab</i>)	Parental Stress on Externalizing, through Communication	.024	.040			051	.109
Household		1.47	1.95	.753	.455	-2.44	5.39
Income		-2.22	.802	-2.77	.008*	-3.83	617
Recent Life Changes		.099	2.08	.048	.962	-4.06	4.26
Child's Age		1.81	1.28	1.41	.165	764	4.38

Note. *p < .0125 or lower. CI = confidence interval; LL = lower limit, UL = upper limit



Figure 19. Path Model 3 diagram for parental stress predicting externalizing behavior problems with communication as a mediator (n = 63).

Note. Results represent unstandardized coefficients (*B*), along with standard errors (*SE*) in parentheses and regression (R^2) value. *p < .0125 or lower

Model 4: Limit Setting Mediator. The fourth and final model tested the relationship between parental stress and externalizing behavior problems, mediated by limit setting. Table 20 demonstrates the unstandardized coefficients (*B*), standard errors (*SE*), and regression (R^2) values, along with the covariates. The results are depicted as a path diagram in Figure 20. The overall model was statistically significant, *F*(6, 56) = 14.94, *p* < .0001, R^2 = .616. The model significantly contributed 62% of the variance in limit setting. There was a significant association between parental stress and limit setting (*a* path); for each unit increase in parental stress, limit setting decreased by .229 units (*B* = .229, *SE* = .024, *p* < .0001). There was not a significant association between limit setting and externalizing behavior problems (*b* path; *B* = -.643, *SE* = .254, *p* = .014). The direct effect (*c* ' path) between parental stress and externalizing behavior problems was not statistically significant (*B* = .190, *SE* = .075, *p* = .014). The indirect effect was not statistically significant, indicating that limit setting did not mediate the relationship between parental stress and externalizing behavior problems (*B* = .147, *SE* = .065, 95% CI = .016, .271).

Table 20.

Results of Path Analysis for Parental Stress Predicting Externalizing Behavior Problems, Mediated by Limit Setting

Path	Description of Path	В	SE	t	р	LLCI	ULCI
а	Parental Stress on Limit Setting	229	.024	-9.43	<.0001*	278	181
b	Limit Setting on Externalizing	643	.254	-2.53	.014	-1.15	133

<i>c</i> ' (Direct effect)	Parental Stress on Externalizing	.190	.075	2.54	.014	.040	.340
Indirect effect (<i>ab</i>)	Parental Stress on Externalizing, through Limit Setting	.147	.065			.016	.271
Household		1.94	1.86	1.04	.301	-1.78	5.67
Income		-2.35	.762	-3.09	.003*	-3.88	827
Recent Life Cha	nges	.718	1.99	.361	.720	-3.27	4.71
Child's Age		2.63	1.24	2.11	.039	.135	5.12

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Note. *p < .0125 or lower. CI = confidence interval; LL = lower limit, UL = upper limit



Figure 20. Path Model 4 diagram for parental stress predicting externalizing behavior problems with limit setting as a mediator (n = 63).

Note. Results represent unstandardized coefficients (*B*), along with standard errors (*SE*) in parentheses and regression (R^2) value. *p < .0125 or lower

Summary

In sum, there was a significant relationship between parental behaviors (parental support, involvement, communication, and limit setting), parental stress, and children's externalizing behavior problems, while there was no significant relationship among children's internalizing behavior problems. Further, there were no significant mediating effects for the 4 models, suggesting that parental behaviors (parental support, involvement, communication, and limit setting) do not mediate the relationship between parental stress and children's externalizing behavior problems. Demographic variables household income, single- and two-parent family [household], child's age, and recent life

changes were controlled for in the path analysis and income results indicated that it contributed to the variation in parental support, involvement, communication and limit setting.

In Chapter 5, a summary of the key finding, as well as an interpretation of the findings, the limitations of the study, recommendations for future research, along with implications of the study are discussed.

Chapter 5 Discussion

The purpose of the study was to quantitatively examine the relationship among parental behaviors, parental stress, and children's social-emotional problems. Parental behaviors are possible mediators in the relationship between parental stress and children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11. I aimed to examine (a) the relationship between parental stress (total stress) and children's social-emotional development (internalizing and externalizing behavior problems), (b) the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's social-emotional development (internalizing and externalizing behavior problems), and (c) parental behaviors as mediator (parental support, involvement, communication, and limit setting) on the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) to fill a gap in the exiting literature regarding low socioeconomic Hispanic families with children ages 6-11.

Scholars have linked SES to parental behavioral functioning and parental stressors that influence child development. Further, scholars established a connection between SES and negative adolescent behaviors. Risk factors identified for negative developmental outcomes included parenting styles (e.g., maternal warmth, harsh parenting, authoritarian, authoritative), parent-child relationship, marital relationship, disadvantage neighborhoods (e.g., higher crime rates and unemployment levels, housing conditions), material hardship, lack of social support, family processes (e.g., marital/family conflict, supportive parenting, familism cultural values, acculturation), parental psychological distress, and home environment (Belsky et al., 2012; Benner & Su
Yeong, 2010; Carlo et al., 2010; Carlo et al., 2011; Chen et al., 2011; Conger & Conger, 2002; Gonzales et al., 2011; Gridley et al., 2013; Hair et al., 2015; Holtrop et al., 2015; Kang, 2013; Lee et al., 2011; Lee et al., 2013; Leidy et al., 2012; Manuel et al., 2012; Mesman et al., 2012; Rijlaarsdam et al., 2013; White et al., 2015). The majority of the literature focused on relationships between parental behaviors and stressors in Black and White families that were predictive of adolescent behavior outcomes; yet, few researchers focused on young children's developmental outcomes, especially within Hispanic families. Hence, a gap existed in the literature concerning the relationship between parental behaviors (parental support, involvement, communication, and limit setting), parental stress (total stress), and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11. There was a lack of research on parental behaviors (parental support, involvement, communication, and limit setting) and its potential to mediate the relationship between parental stress (total stress) and children's social-emotional problems (internalizing and externalizing behavior problems) in low socioeconomic Hispanic families with children ages 6-11.

A relationship was found among parental stress (total stress) and children's social-emotional development (externalizing behavior problems) and among parental behaviors (parental support, involvement, communication, and limit setting) and children's social-emotional development (externalizing behavior problems). However, no relationships were found between parental behaviors, parental stress, and children's internalizing behavior problems. Despite the relationship among parental stress, parental behaviors, and externalizing behavior problems, parental behaviors (parental support, involvement, communication, and limit setting) did not emerge as a mediator on the relationship between parental stress and children's externalizing behavior problems.

Interpretation of the Findings

Children raised in low socioeconomic conditions experience more than economic challenges. They are at greater risk of potentially demonstrating social, emotional, behavioral, cognitive, and physical challenges (Emmen et al., 2013; Newland et al., 2013). Parents affected by economic hardship and pressures can demonstrate poor parenting choices, as parents are generally unable to hide stress related to economic instability (Abidin, 1990, 1992; Newland et al., 2013).

Parental Stress and Children's Social-Emotional Problems

The role of parental stress on the physical and mental health outcomes impacting children at different developmental stages has been evaluated in the literature. Scholars have identified the negative effects demonstrated by physical and mental health issues that emerge in childhood (Roberts et al., 2013; Sameroff, 2010; Shonkoff, 2010; Shonkoff & Garner, 2012; Victorino & Gauthier, 2009). I examined the relationship between parental stress and children's social-emotional problems (internalizing and externalizing behavior problems). The results were partially consistent with the previous literature suggesting that parental stress is related to children's social-emotional problems (Emmen et al., 2013; Gonzales et al., 2011; Leidy et al., 2012; Parke et al., 2004; Puff & Renk, 2014). I found that parental stress and children's internalizing behavior problems were not correlated. However, parental stress and children's externalizing behavior problems were found to be positively correlated. Based on the findings, I found that as parents' stress levels increase, children are at greater risk of experiencing an increase in

externalizing behavior problems. As children's externalizing behavior problems increase, parents are also at greater risk of experiencing an increase in stress levels. To determine the social, emotional, and functional aspects of family interactions, the role of parental stress must be examined to define how the parents and children interact (Conger et al., 2010; Crosnoe & Cooper, 2010; Emmen et al., 2013; Gonzales et al., 2011; Lee et al., 2013; Leidy et al., 2012; Leidy et al., 2012; Zeiders et al., 2011).

Parental Behaviors and Children's Social-Emotional Problems

A child's development is based on various factors in the family (Weis & Toolis, 2010). The role of parental behaviors has been shown to be a factor in children's developmental outcomes, specifically the relationship between parent-child (Carlo et al., 2011; Zeiders et al., 2011) and the parent and child physical and mental health (Carlo et al., 2011; Chen et al., 2011; Lee et al., 2013; Manuel et al., 2012; Reising et al., 2013; Rijlaarsdam et al., 2013). Parental behaviors are important to children's development (Weis & Toolis, 2010, p. 850). In this study, I examined the relationship between parental behaviors (parental support, involvement, communication, and limit setting) and children's social-emotional problems (internalizing and externalizing behavior problems). The results were partially consistent with the previous literature suggesting that parental behaviors are related to children's social-emotional problems (Benner & Su Yeong, 2010; Carlo et al., 2011; Leidy et al., 2012; Masarik & Conger, 2017; Parke et al., 2004; Puff & Renk, 2014; Slack et al., 2011; Weis & Toolis, 2010; Zeiders et al., 2011). I found that parental behaviors and children's internalizing behavior problems were not correlated. However, parental behaviors (parental support, involvement, support, in

communication, and limit setting) and children's externalizing behavior problems were found to be negatively correlated.

First, I found that as parental support increases, children experience a decrease in externalizing behavior problems. As children's externalizing behavior problems decrease, parental support increases. Second, I found that as parental involvement increases, children experience a decrease in externalizing behavior problems. As children's externalizing behavior problems decrease, parental involvement increases. Parents who are responsive to their children signal that they accept their children through involvement, nurturing, affection, shared activities, sensitivity to their child's needs, and emotional and tangible support; they communicate to their children that they are worthy of being cared for by others, which has proven to be a factor in children's developmental outcomes (Benner & Su Yeong, 2010; Weis & Toolis, 2010). Third, I found that as parental communication increases, children experience a decrease in externalizing behavior problems. As children's externalizing behavior problems decrease, parental communication increases. Parents who openly and effectively communicate with their children maintain close family connections and are more successful in social competence, such as in the areas of social self-efficacy and social problem-solving skills (Leidy et al., 2012). Lastly, I found that as parental limit setting increases, children experience a decrease in externalizing behavior problems. As children's externalizing behavior problems decrease, parental limit setting increases. Children learn how to socially interact from reinforcement and modeling via their parents. Therefore, parents who cautiously set limits and clarify the motives for their actions provide a supportive context for child development. Children can learn social self-efficacy (i.e., how to get

along with others) and effective social problem-solving skills (i.e., think carefully, evaluate solutions, anticipate consequences). Children who are confident and display positive social interaction skills have lower levels of problem behaviors and contribute to positive family functioning (Leidy et a., 2012).

The findings of this study extend on the importance of examining the parental behaviors that impact the social and emotional development of children in Hispanic families. Socioeconomically disadvantaged Hispanic children experience a lack of opportunities because of factors that hinder effective parenting. Hispanic families struggle to meet the social, emotional, and academic needs of their children because they lack the necessary skills to ensure positive outcomes. Therefore, they are less likely to seek social support networks (i.e., support groups, agency support, parent education training, or family support), thus making negative choices that negatively impact the development of children (Ayón, 2011; Belsky et al., 2012; Benner & Su Yeong, 2010; Delgado et al., 2013; Gonzales et al., 2011; Letourneau et al., 2011; Lopez, 2015; Mesman et al., 2012; Parke et al., 2004; Puff & Renk, 2014; Rubio-Codina et al., 2015; Shonkoff & Garner, 2012; Turner et al., 2015; Yoshikawa et al., 2012; Zeiders et al., 2011).

Given these findings, parental behaviors and parental stress may serve as a useful target of intervention for Hispanics from socioeconomically disadvantaged families who have children with externalizing behavior problems.

Parental Stress and Parental Behaviors and Children's Internalizing Behavior Problems

In the current study, internalizing behavior problems were not related to parental stress and parental behaviors. An alternative explanation could be that children's internalizing behavior problems are moderately stable over time than externalizing behavior problems. Internalizing behavior problems decrease as children get older, specifically 4.5 to 6 years of age (Schappin, Wijnroks, Uniken Venema, & Jongmans, 2018), whereas I focused on children ages 6-11. Further, Hispanic children's internalizing behavior problems stabilize over time, possibly because of the greater endorsement of family obligation values (Telzer, Gonzalez, Tsai, & Fuligni, 2015). This could suggest why internalizing behavior problems did not have a significant relationship among Hispanic population because of familism (Stein, 2015), which translates into an increase of family obligation values and more protective parenting, thus higher levels of parental support, acceptance, indulgence, and care (Domenech Rodriguez, Donovick, & Crowley, 2009; Halberstadt & Lozada, 2011; Stein, 2015; Telzer et al., 2015). Familism provides the child with family connection, which gives the child meaning, purpose, and higher self-esteem that could relate to decreased levels of internalizing behavior problems (Telzer et al., 2015). This could be associated with lower levels of parental stress. Further, in the presence of higher levels of internalizing behavior problems in children, Hispanic mothers respond in a more supportive manner (Rodas, Chavira, & Baker, 2017). This could be associated with higher levels of positive parental behaviors. Familism could have served as a protective factor for Hispanic mothers and children by buffering the effects of outcomes such as acculturative stress, parental stress, parental behaviors,

and child behavior problems (Stein, 2015). Thus, I examined the relationship between Hispanic mothers' parental stress and parental behaviors and children's internalizing behavior problems and did not examine possible cultural influences that could adhere to parental stress and parental behaviors, which could suggest a relationship to children's internalizing behavior problems such as familism.

Parental Behaviors as a Mediator Between Parental Stress and Children's Social-Emotional Problems

The role of parental behaviors as mediators on the relationship between parental stress and children's externalizing behavior problems is important to describe the constellation of issues (e.g., depression, behavioral issues, and cognitive delays) that are related to economic hardship and influence the functioning of both parents and children in a family. Parents struggling with these elements tend to be less prepared to address the needs of their children and end cycles of poverty or problematic outcomes (Crosnoe & Cooper, 2010). Parenting plays a role in how children learn language, adapt, and learn functional behaviors (Hartas, 2011). Parents who support their child's learning are more likely to experience favorable outcomes.

Parental behaviors mediate the relationship between family stress on behavior problems. Cui and Conger (2008) found that marital problems (e.g., distress and conflict) were related to high levels of negative parental behaviors (e.g., hostility and harshness) and low levels of positive parental behaviors (e.g., support, warmth, effective child management), leading to adolescent maladjustment (e.g., externalizing and internalizing problems). Smith and Hancock (2010) found that high levels of marital distress were related to high levels of dysfunctional parenting behaviors (e.g., low nurturance, ineffective discipline), leading to higher levels of children's behavior problems (e.g., externalizing and internalizing problems). Gonzales et al. (2011) found that parenting behaviors (e.g., maternal and paternal warmth) mediated the relationship between family and neighborhood economic conditions on adolescent externalizing behavior problems but not on internalizing behavior problems. An association was also found between parenting behavior (e.g., warmth) and family and neighborhood conditions (e.g., family economic hardship, neighborhood familism values; Gonzales et al., 2011). Emmen et al. (2013) found that both general maternal psychological stress and maternal acculturation stress mediated the relation between SES and maternal positive parenting.

I examined which parental behaviors (parental support, involvement, communication, and limit setting) mediate the relationship between parental stress and children's externalizing behavior problems. Additionally, four demographic variables (household income, single- and two-parent family [household], child's age, and recent life changes) were controlled to explain the proportion of variance in the mediator variables. I found that household income contributed to the variation in parental support, involvement, communication, and limit setting. Parental factors such as parental stress, ineffective parenting, and children's problematic parental behaviors are linked to economic and social stressors, and they tend to be acute in ethnic minority populations and populations experiencing significant levels of economic distress (Slack et al., 2011).

However, when the path analysis was conducted, I found that the study was not consistent with the previous literature. Hence, I did not find parental behaviors (parental support, involvement, communication, and limit setting) to mediate the relationship between parental stress and children's externalizing behavior problems. This could be

due to factors such as this study's sample size and target age group, as previous literature mostly focused on larger sample sizes and adolescents. Additionally, I examined parental stress in Hispanic mothers and did not examine other sources that could cause stress such as acculturation, poor neighborhood, overcrowding in the home, and discrimination. Therefore, children's social-emotional problems could have been mediated by a series of factors, according to the family stress model, such as acculturation, parental emotional state, marital relationship, parental depression that I did not examine (Parke et al., 2004). Further, I examined parental behaviors in Hispanic mothers and did not examine other sources that could cause parental differences such as cultural influences (e.g., familism, acculturation, cultural values), religion, personality, and psychological distress (e.g., depression, anxiety). Cultural factors may alter the links among parental behaviors and children's social-emotional problems in Hispanic families (Dumka Gonzales, Weheeler, & Millsap, 2010). In addition, cultural influences construct distinctive parental practices, such as familism (Santisteban, Coatsworth, Briones, Kurtines, & Szapocznik, 2012). Familism places a higher emphasis on the family unit (i.e., family obligation values, family support values), and parents are more protective, thus creating higher levels of parental support, acceptance, indulgence, care, and consistency with discipline (Domenech Rodriguez, Donovick, & Crowley, 2009; Halberstadt & Lozada, 2011; Stein, 2015; Telzer et al., 2015). Further, familism has an indirect effect on children's socialemotional problems through parental behaviors (Santisteban et al., 2012) and that an indirect path from familism through children's internalizing behaviors is significant. Familism predicts higher levels of internalizing behavior problems (Kuhlberg, Pena, &

Zayas, 2010). Therefore, children's social-emotional problems could have been mediated by cultural factors, such as familism, which I did not examine.

Family Stress Model

The finding of Research Question 1 and 2 are consistent with Conger et al. (1997) family stress model. The family stress model proposes that the family system can be negatively impacted by experiences of economic hardship and economic pressures, which undermines parent's mental health, the quality of family relationship, parenting, and subsequently children's social-emotional development (Masarik & Conger, 2017). This theory suggests that children's social-emotional development can be negatively impacted by the lack of parental attention and lack of nurturing that extends from parental responses to stress (Conger et al., 1997; Conger & Donnellan, 2007). The findings provide a rationale for investigating the relationship of parental behaviors and parental stress on children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11. However, the results for Research Question 3 were not consistent with the family stress model, which stipulates that parental stress can play a role in children's social-emotional problems and children are at a higher risk of socialemotional problems from inconsistent participation by parents in the active process of parenting (Conger & Conger, 2002). The findings provide a rationale for further investigation of the mediating effect of parental behaviors on the relationship between parental stress and children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11.

Limitations of the Study

Path analysis research was correlational in nature, so causation could not be inferred. The study aimed to clarify correlation between the variables and indicate the strength of the casual hypothesis, but not to prove the direction of causation. Therefore, the path analysis was an appropriate analysis for this study. Secondly, the findings may not generalize to all Hispanics, across all populations, families with children from different age groups, or all levels of SES, because the data is only representative of low socioeconomic Hispanic families with children ages 6-11 in South Texas. The sample was collected from an elementary school at a South Texas school district where the majority of the children are labeled as economically disadvantaged and are Hispanic in origin, which proved to be a strength instead of a limitation in the study.

Lastly, the findings are solely limited to mothers' self-reported responses to the instruments, which mothers may not have provided accurate responses, over reported, or under report a child's social-emotional problems, their relationship with their child, and distress they may experience in their parenting roles. They may have answered depending on their knowledge of age appropriate child's competencies and behavioral/emotional problems, their belief of what is the correct response rather than their true parenting practices, their current mood at the time of the responding, their biased views of and attitudes about their child, their parenting role and practices, and wanting themselves and their child to be viewed in a positive light. The use of parent report alone could bring to question the reliability of the data. However, the instruments have embedded scales that measure defensive, distorted, or inconsistent responses, which none of the instruments were flagged for such responding. Despite this added measure in

each instrument, precautions were taken to reduce the effects of such responses. Participants were explained the importance of responding truthfully and confidentially was ensured.

Recommendations

Although parental behaviors did not function as mediators in the study, the parental behaviors should be examined in a larger population of Hispanics from socioeconomically disadvantaged families from locations such as communities, clinics, behavioral hospitals, youth programs, detention centers, and schools from various geographic locations instead of an elementary school in South Texas. This could likely increase generalization of results. Additionally, the study relied solely on mothers' responses of parental behaviors, parental stress and children's social-emotional problems. Thus, future studies should examine the difference between fathers, mothers, and other primary caregivers that have guardianship/custody of children (i.e. grandparents, aunts). In addition, the study was comprised of Mexican and Mexican American mothers with Mexican American children. Thus, future studies should examine if there are differences among Mexican and Mexican American children.

I found that parental behaviors and parental stress are related to some areas of children's social-emotional problems (e.g., externalizing behavior problems) but not others (e.g., internalizing behavior problems). Thus, additional research is needed to determine which type of children's social-emotional problems are impacted by the effect of parental behaviors and parental stress. In addition, I found that parental behaviors, parental stress, and children's social-emotional problems are related to some demographic factors (e.g. mother's age, household, income, recent life changes, child's

age, child's grade) but not others (e.g., marital status, education, employment, members living in the household, children living in the household, child's gender). But only one demographic factor proved to influence parental behaviors and parental stress on children's social-emotional problems. Thus, additional research is needed to determine demographic factors that influence the impact of parental behaviors and parental stress on children's social-emotional problems. Lastly, the theoretical framework for the study is based on the family stress model (Conger et al., 1997; Conger et al., 2010). The model is based on an integrated view of family process such as parental behaviors, parental stress, and children's social-emotional problems. The study only examined influences of parental behaviors and parental stress but there are other factors (e.g., parent's mental health, substance abuse problems, disability, academic problems, lack of social support or coping skills, acculturation, familism, cultural values, housing conditions, and teacher support) in the child's environment that may influence social-emotional development, which may be worthwhile to research.

Positive Social Implications

Although this study did not confirm a mediating effect among parental behaviors between parental stress and children's social emotional problems. However, a relationship was found between parental behaviors, parental stress, and children's externalizing behavior problems. Thus, these significant relationships provide additional foundation to the limited body of knowledge on the impact of parental behaviors and parental stress on children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11. It is important to gain a better understanding of the parental stressors and parental behaviors such as parental support, involvement, communication, and limit setting that impact the quality of parenting, and consequently the social-emotional development of children.

Hispanics are the largest growing ethnic group in the United States (Lopez, 2015), have the highest rate of children being raised in socioeconomically disadvantaged families under the age of 18 (Krogstad, 2014), and highest rate of mothers as the primary or sole caregiver (Broussard, Joseph, & Thompson, 2012). The increase of the Hispanic population and high rate of mothers as primary or sole caregivers increases the demand for culturally diverse services and interventions, these findings could affect change in this population. The findings could provide an improved understanding of the influences of parental behaviors and parental stress have on children's socioemotional problems among low socioeconomic Hispanic families which can prove to be essential in enhancing the quality of parenting services and intervention. This is especially beneficial among Hispanic families, which readily seek services, such as therapeutic services, parent education programs (Ayón, 2011; Lopez, 2015).

The findings could prove beneficial when consulting with parents, educators, social workers, therapists, and government agencies that are working with children ages 6-11 living in socioeconomically disadvantaged Hispanic families. Hispanic families may feel overwhelmed with the family processes due to lack of community, individual, or family influences (e.g., lack of social support, coping strategies, effective problem-solving skills, acculturative stress; Masarik & Conger, 2017) because they lack the understanding of how their stress can impact choices about participation in programs that help reduce family/parental stress and improve parental behaviors.

Ultimately, the findings could improve the quality of parenting and reduce negative impacts of parental issues and develop and/or improve targeted and relevant interventions for parent support through early identification and intervention of at-risk Hispanic families in need of support from services such as mental health, social services, etc. and provide a better understanding of developmental influences of children ages 6-11. This could potentially improve the parent's sense of self-efficacy and competency, increase the use of positive parenting behaviors, increase social support connections, improve the parent-child relationship, child's behavior, and parent's mental health well-being (Rothe, Rogers-Tanner, & Skrypek, 2016).

Conclusion

This study provided some insight into the relationship among parental behaviors and parental stress on children's social-emotional problems in a sample of 63 Hispanic mothers with children ages 6-11 in low socioeconomic Hispanic families. PSI-4 SF (Abidin, 2012), was related to children's social-emotional problems, specifically externalizing behavior problems, as measured by CBCL/6-18 (Achenbach & Rescorla, 2001). PCRI (Gerard, 1994), was related to children's social-emotional problems, specifically externalizing behavior problems, as measured by CBCL/6-18 (Achenbach & Rescorla, 2001). PCRI (Gerard, 1994), was related to children's social-emotional problems, specifically externalizing behavior problems, as measured by CBCL/6-18 (Achenbach & Rescorla, 2001). The results of the path analysis indicated that parental behaviors (parental support, involvement, communication, and limit setting) do not intervene in the relationship between parental stress and children's social-emotional problems (externalizing behavior problems) among low socioeconomic Hispanic families with children ages 6-11.

Parents, policy makers, intuitions, communities, mental health and health providers, and educators should understand how to effectively meet the needs of at-risk Hispanic families (Lee et al., 2011; Lopez, 2015; Slack et al., 2011) and comprehend the impact of parental behaviors and parental stress influence children's social-emotional problems in low socioeconomic Hispanic families. By increasing understanding of the parental behaviors and parental stressors that influence children's socioemotional problems at ages 6-11, the study increased available information regarding parental behaviors, parental stress, and children's externalizing behaviors among low socioeconomic Hispanic families with children ages 6-11. Preventive factors, such as use of positive parental support, involvement, communication, limit setting and culturally diverse services and interventions of parental quality by parents and individuals and/or systems that work with low socioeconomic Hispanic families can address the needs of Hispanic families and benefit both parental stress and enhance parental quality to improve the parent-child relationships and child outcomes among low socioeconomic Hispanic families with children ages 6-11.

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Appendix A: Demographic Questionnaire

This questionnaire is important for understanding the specific population studied and how these factors may influence the results of the study. All information provided will remain confidential, and any use of this data will not include identifying information of study participants.

Child Information

What is your child's gender?	nale					
What is your child's age? 6 years 9 years	☐ 7 years ☐10 years	☐ 8 years ☐ 11 years				
What is your child's current 1^{st} 2^{nd}	grade? $\Box 3^{\rm rd}$	□ 4 th	□ 5 th			
Is your child of Hispanic, Latino, or Spanish origin? No, not Hispanic, Latino, or Spanish origin Yes, Mexican Yes, Mexican American Yes, Cuban Yes, Puerto Rican Yes, another Hispanic, Latino, or Spanish origin						
	<u>Parent Informat</u>	tion_				
How would you describe you Two-parent family	ar household?	nt family				
What is your marital status?	ried)		Divorced			
What is your age? 18-20 years 36-40 years 56-60 years	 20-25 years 41-45 years 61 years and over 	☐ 26-30 years ☐ 46-50 years	a □ 31-35 years □ 51-55 years			
Are you of Hispanic, Latino, No, not Hispanic, Yes, Mexican Yes, Cuban Yes, another Hispa	or Spanish origin? Latino, or Spanish orig	in erican 1 origin				

What is your employment sta	tus?					
	□ Employed	□ Self-Employed				
☐ Military	□ Retired	□ Student				
Homemaker	□ Other					
What is your highest education	onal level?					
🗌 Elementary school	□ Middle sch	nool 🛛 🗌 High School (no diploma)				
🗌 High school diplor	na 🛛 🗌 GED	Some College (no degree)				
☐ Technical/trade scl	nool 🗌 2-year deg	ree 4-year degree				
□ Other						
What is the combined househ	old annual income?					
□ Under \$5,000	□ \$5,001-10,000	□ \$10.001-15,000				
□ 15,001-20,000	□ \$20,001-25,000	□ \$25,001-30,000				
□ \$30,001-35,000	□ \$35,001-40,000	□ \$40,001-45,000				
□ \$45,001-50,000	□ \$50,001-55,000	□ \$55,001-60,000				
□ \$60,001-65,000	□ \$65,001-70,000	□ \$70,001-75,000				
□ \$75,001-80,000	□ \$80,001-85,000	□ \$85,001-90,000				
□ \$90,001-95,000	\Box More than \$95,00	1				
Do you receive any government public assistance (check all that apply)?						
\Box SNAP (Food Stam	ps) \Box TANF	Other				
TT 1 1 1 1		2				
How many members live in t	he household	?				
IT and a second shift down lives in the	- 1	0				
How many children live in th	e nousenoid	{				
Family Information Desent Life Changes						
Have there been any major life changes within the past 3 years?						
\square no changes	ie enanges within the	past 5 years.				
\Box iob changes	\Box loss of employment	\square relocation				
\Box Job changes \Box death	\square health condition					
\Box child birth	\square incarceration	□ pregnancy □ divorce				
\Box separation	deportation	\Box Other				

Cuestionario Demográfico

Este cuestionario es importante para comprender la población específica estudiada y cómo estos factores pueden influir en los resultados del estudio. Toda la información proporcionada permanecerá confidencial y cualquier uso de estos datos no incluirá información de identificación de los participantes del estudio

Información del niño

¿Cuál e	es el sexo de su hijo(a) □ Masculino	?			
¿Cuál e	es la edad de su hijo(a) □ 6 años □ 9 años)? □ 7 años □10 años	☐ 8 años ☐ 11 años		
¿Cuál e	es el grado de su hijo(a $\Box 1^{er}$ $\Box 2^{do}$	a)?	4 ^{to}	□ 5°	
 ¿Es su hijo(a) de origen hispano, latino o español? No, no es de origen hispano, latino, o español Sí, es mexicano Sí, es cubano Sí, es puertorriqueño Sí, es de otro origen hispano, latino o español 					
Información de los padres					
¿Cómo se describe su hogar? Hogar con dos padres Hogar con un padre					
¿Cuál e	es su estado civil? □ Soltero(a) (nunca o □ Divorciado(a)	casado(a))	Casado(a) Viudo(a)	□ Separado(a) □ Otro	
¿Cual es su edad? □ 18-20 años □ 20-25 años □ 26-30 años □ 31-35 años □ 36-40 años □ 41-45 años □ 46-50 años □ 51-55 años □ 56-60 años □ 61 años y más					
 ¿Es usted de origen hispano, latino o español? No, soy de origen hispano, latino, o español Sí, soy mexicano Sí, soy mexicano Sí, soy cubano Sí, soy puertorriqueño Sí, soy de otro origen hispano, latino o español 					

¿Cuál es su situación laboral? Desempleado(a) En el ejército Ama de casa] Empleado(a)] Retirado(a)] Otro	☐ Trabajador(a) p ☐ Estudiante	oor cuenta propia		
¿Cuál es su nivel educativo más Escuela primaria (PK- Escuela secundaria (9 Prueba de Desarrollo Escuela Técnica	alto? -5) -12, sin diploma) Educativo General (] Licenciatura de 2 a 	☐ Escuela intermo ☐ Diploma de esc (GED) ☐ Un poco ños ☐ Licencia	edia (6-7) suela secundaria o de universidad atura de 4 años		
¿Cuál es el ingreso anual combin Debajo \$5,000 15,001-20,000 \$30,001-35,000 \$45,001-50,000 \$60,001-65,000 \$75,001-80,000 \$90,001-95,000	nado del hogar? \$5,001-10,000 \$20,001-25,000 \$35,001-40,000 \$50,001-55,000 \$65,001-70,000 \$80,001-85,000 Mas que \$95,001	 □ \$10.001-15,000 □ \$25,001-30,000 □ \$40,001-45,000 □ \$55,001-60,000 □ \$70,001-75,000 □ \$85,001-90,000))))		
¿Recibe alguna asistencia pública del gobierno (marque todo lo que corresponde)?					
¿Cuántos miembros viven en el	hogar	?			
¿Cuántos niño/as viven en el hogar?					
Información de la familia - Cambios recientes de la vida					
¿Ha habido cambios importantes iningún cambio cambio de trabajo fallecimiento nacimiento de un niño separación	s en su vida en los ú pérdida de estado de sa co encarcelam deportaciór	Itimos 3 años? empleo	reubicación embarazo divorcio Otro		

Appendix B: Permission Letter to Publisher to Use Instruments

My name is Melanie B. Rodriguez, I am a doctoral student at Walden University. I am currently writing my dissertation titled "Parenting Behaviors in Low Socioeconomic Hispanic Families." I would like to request your permission to use the [instrument name] as one of my survey instrument. I find your survey meets the needs for gathering my dissertation data.

The purpose of this study is to quantitatively examine the relation between parenting behaviors (mediator variable), parental stress (independent variable), and children's social-emotional problems (dependent variable). Specifically, to examine the extent of the influence on children's socioemotional development and to assess their variation by child age. This will aid in the improvement of parent support by providing age specific developmental influence, which focus on targeted strategies to assist families in improving their quality of parenting. The objectives of this study are:

- 1. To examine the relationship between parental stress and children's socialemotional development in low socioeconomic Hispanic families with children ages 6-11.
- 2. To examine the relationship between parental behaviors and children's socialemotional development in low socioeconomic Hispanic families with children ages 6-11.
- 3. To examine the extent of parental behaviors as a possible mediator in the relationship between parental stress and children's social-emotional problems in low socioeconomic Hispanic families with children ages 6-11.
- 4. Furthermore, the study will also establish the association between low SES and poor outcomes for children, specifically in Hispanic families. It will enhance the understanding of the issue and provide a foundation for methods for change, by relating the problem to age specific mechanisms, through which professionals and agencies can address this problem to improve outcomes for children. The study is shaped by a central view that age specific interventions for children who are atrisk of poor outcomes is a beneficial strategy to address the challenges for this population.

Thank you for your time and I look forward to hearing from you soon.

Sincerely,

Melanie B. Rodriguez

Appendix C: Permission to Use Parent Stress Index Short Form



16204 N. FLORIDA AVENUE + LUTZ, FLORIDA 33549 Telephone: 813.968.3003 + Fax: 813.968.2598 + Web: www.parinc.com



Dear Ms. Rodriguez:

In response to your recent request, permission is hereby granted to you to include up to a total of three (3) sample items from the Parenting Stress Index, 4th Edition Short Form (PSI-4-SF) in your dissertation titled, *Parental Behaviors of Mothers in Low Socioeconomic Hispanic Families*. If additional material is needed or any further publication in a Journal (or otherwise), it will be necessary to write to PAR for further permission.

This Agreement also verifies that you have our permission to use the published PSI-4-SF in your dissertation project based on your purchase of the Test materials from us on October 2, 2017 (order 861542). Based on our records, you purchased enough materials to administer the test to as many as 25 participants utilizing the English form and 25 participants utilizing the Spanish form. Purchase of the forms for use in your study is permission to use them as printed by PAR.

This Agreement is subject to the following restrictions:

(1) Any and all materials used will contain the following credit line:

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PSI-4-SF Rodriguez Sample Items only in dissertation & Permission Letter - 10-6-2017



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- (4) One copy of any of the material reproduced will be sent to PAR to indicate that the proper credit line has been used.

TWO COPIES of this Permission Agreement should be signed and returned to me to indicate your agreement with the above restrictions. I will then sign it for PAR and return a fully executed copy to you for your records.

Sincerely,

Vicki M. McFadden Permissions Specialist <u>vmark@parinc.com</u> 1-800-331-8378 (phone) 1-800-727-9329 (fax)

ACCEPTED AND AGREED:

BY: Melanie B. Roliquez

DATE: 10 9 17

ACCEPTED AND AGREED:

BY: Wicki M. MCFADDEN DATE: October 9,2017

PAR CUSTOMER No.: 66486

PSI-4-SF Rodriguez Sample Items only in dissertation & Permission Letter - 10-6-2017

RE: From PAR: PERMISSION TO USE: Parent Stress Index Short Form, Fourth Edition Form (PSI-4SF)

Vicki McFadden <vmark@parinc.com>

Tue 10/3/2017 3:20 PM

Melanie,

For Submission purposes: If the PAR Test is marked "For Review Only, Do NOT Copy" then you can submit it with the IRB electronically. Any and all storage of the PAR Test review file should be secure and password protected by the IRB site. The review copy should not be printed or copied for any reason.

Thank you,

Vicki McFadden Permissions Specialist

Psychological Assessment Resources, Inc., 16204 N. Florida Avenue, Lutz, FL 33549, www.parinc.com Telephone: (888) 799-6082; Fax: (800) 727-9329; Intl Fax: (813) 449-4109; e-mail: vmark@parinc.com

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Appendix D: Permission to Use Parent-Child Relationship Inventory

RE: WPS Rights and Permission



PCRI for IRB Review

Yani McBride <ymcbride@wpspublish.com>

Fri 12/1/2017 2:10 PM WPS - PCRI

Carights <rights@wpspublish.com>;

1 attachments (2 MB)

PCRI Spanish.pdf;

Dear Melanie,

Thank you for your interest in our materials. This reply serves as your permission from Western Psychological Services to reprint the attached Spanish sample of the Parent Child Relationship Inventory (PCRI) for the requested IRB purpose only, and not for application in administration or any other use in whole or in part, on provision that the reprint bear the following notice:

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Please let me know if you have any follow-up questions.

Best,

Yani McBride Rights & Permissions Assistant

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October 16, 2017



RE: Parent Child Relationship Inventory (PCRI)

Dear Melanie,

This follows up your request of 03Oct'17, regarding permission to reprint selected test items 2, 26, and 40 from the *Parent Child Relationship Inventory (PCRI)*, in your upcoming dissertation paper.

WPS permits your reprint of the requested items for the described purpose and indicated edition only, on provision that the following required notice appears in its entirety on each reprint that you make of the selected material:

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On behalf of WPS, I appreciate your interest in this instrument as well as your consideration for its copyright. It's our privilege to assist helping professionals, and I hope we can be of service to your future work.

Sincerely yours. mohar

Sandra I. Ceja Rights & Permissions Lead

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SC:ym

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Appendix E: Permission to Use Child Behavior Checklist for Ages 6-18

Re: CBCL/6-18

ASEBA - Achenbach System <ASEBA@uvm.edu>

Mon 10/2/2017 6:47 AM ASEBA-CBCL

Melanie,

Your discount application has been approved. When placing your order, please note that you have a discount application on file so we know to apply the discount when we process your order.

Thank you,

ASEBA 1 South Prospect Street UVM Medical Center, St. Joseph's Wing, Room <u>3207</u> Burlington, VT 05401-3456 Customer Service Tel: (802) 656-5130, Option 2 Technical Support Tel: (802) 735-1540 Technical Support Email: techsupp@aseba.org www: www.ASEBA.org

Have you read our frequently asked questions? You can find them here: https://answers.aseba.org

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ASEBA

Research Center for Children, Youth & Families, Inc., A Non-Profit Corporation 1 South Prospect Street, St Joseph's Wing (Room #3207), Burlington, VT 05401 Telephone: (802)656-5130 Email: mail@aseba.org / Website: http://www.aseba.org

October 10, 2017

Melanie B. Rodriguez

Dear Ms. Rodriguez:

I hereby grant permission for you to reproduce sample copies of the Latino Spanish Child Behavior Checklist for Ages 6-18 as well as the Child Behavior Checklist for Ages 6-18 in your dissertation entitled "Parental Behaviors of Mothers in Low Socioeconomic Hispanic Families", which you are submitting in partial fulfillment of the requirements for the doctoral program in Clinical Psychology at Walden University, Minneapolis, MN.

The forms included in the dissertation document must be stamped "SAMPLE" and the pages that display the samples must include the following notice:

Copyright T.M. Achenbach. Reproduced by permission.

Sincerely yours, "Munter

Thomas M. Achenbach, Ph.D. Professor and President Research Center for Children, Youth, and Families

Appendix F: Permission to Recruit Participants

I Melanie B. Rodriguez, Walden University doctoral candidate, am requesting your permission to recruit participants at one of your elementary schools. The population studied are parents of children in grades 1st-5th that are identified as economically disadvantaged. The purpose of the study is to examine the impacts of parental behaviors and parental stress on the social and emotional development of Hispanic children ages 6-11 years of age from low income families.

- The elementary school will send out an invitation letter to parents of children in 1st-5th grade.
- Parents agreeing to participate in the study will be surveyed with four instruments (taking approximately 50 minutes to complete) containing questions regarding parent's perception of their personal stress, relationship with their child, the child's behavior, and demographic open-ended questions.
- I will administer the instruments to the parents at your elementary campus in a private room or area free of interruptions and where privacy and confidentiality can be maintained.

The parents' decision to participate in this study is voluntary and will receive \$5.00 to say thank you for their participation. The data collected will be kept confidential. The results of this study may be published; however, the published results will not contain identifying information that would in any way identify the parent, school district, nor the elementary campus.

I am extremely grateful to you for taking time out of your busy schedule to assist me in my research. Thank you for your time and I look forward to hearing from you soon.

Sincerely,

Melanie B. Rodriguez

Dear Melanie Ballardo Rodriguez,

We understand that you will be undertaking a Walden University student researcher role that is separate from your School Counselor role. In your student research role, I authorize the following:

- (a) recruit from an elementary school(s) where you, the researcher, does not counsel or have any involvement or interaction with parents and families,
- (b) the elementary school may send out invitation letters to parents by mail and with students in 1st-5th grade in a sealed envelope in English and Spanish, and
- (c) access to a private room or area free of interruptions, where privacy and confidentiality can be maintained.

We understand that you will administer instruments at a specified time and allow participants to volunteer and decline anonymously in order to minimize conflicts of interest and other potential ethical problems.

We understand that our organization's responsibilities include: (a) send parents an invitation letter, (b) access to a private area to administer the instruments, and (f) maintain confidentiality. We reserve the right to withdraw from the recruitment of participants from this study at any time if circumstances change.

We understand that the student will not be naming our organization in the doctoral project report that is published in Proquest.

I confirm that I am authorized to approve the recruitment of participants in this setting and that this plan complies with the organization's policies.

I understand that the data collected will remain entirely confidential and may not be provided to anyone outside of the student's supervising faculty/staff without permission from the Walden University IRB.

Sincerely, Janie D. Ybarra-Rodriguez Human Resources Director

By signing below, I am certifying and confirming that you are authorized to recruit participants for the study in this setting.

Authorization Official's Signature

01/18

Dear Melanie Ballardo Rodriguez,

I understand that you will be undertaking a Walden University student researcher role that is separate from your School Counselor role. In your student research role, I authorize the following:

- (a) to recruit from this elementary school where you, the researcher, does not counsel or have any involvement or interaction with parents and families,
- (b) we will send out invitation letters to parents by mail and with students in 1st-5th grade in a sealed envelope in English and Spanish, on your behalf, and
- (c) provide you access to a private room or area free of interruptions, where privacy and confidentiality can be maintained.

I understand that you will administer instruments at a specified time and allow participants to volunteer and decline anonymously in order to minimize conflicts of interest and other potential ethical problems.

I understand that our organization's responsibilities include: (a) send parents an invitation letter, (b) access to a private area to administer the instruments, and (f) maintain confidentiality. I reserve the right to withdraw from the recruitment of participants from this study at any time if circumstances change.

I understand that the student will not be naming our organization in the doctoral project report that is published in Proquest.

I confirm that I am authorized to approve the recruitment of participants in this setting and that this plan complies with the organization's policies.

I understand that the data collected will remain entirely confidential and may not be provided to anyone outside of the student's supervising faculty/staff without permission from the Walden University IRB.

Sincerely, Christopher O. Park Principal

By signing below, I am certifying and confirming that you are authorized to recruit participants for the study in this setting.

<u>|-||-18</u> Date

School Principal's Signature

Appendix G: Invitation Letter

Dear Parent:

My name is <u>Melanie Rodriguez</u>. I am a doctoral student conducting a study for my Walden University dissertation. I am kindly requesting your participation in a doctoral research study.

What is the study about?

The intention is to assess for influences of parenting behaviors and parental stress have on children's development.

If I agree to take part, what will I be asked to do?

Answer questions in 4 questionnaires about: your family's income, your educational level, etc.; your personal stress; your relationship with your child; and your child's behavior.

How long will the study take me to complete?

Approximately 50 minutes

Will my personal information be used?

Participation is completely voluntary and may withdraw from the study at any time. No personal information will be used and it will be kept confidential. Each questionnaire will be identified by an assigned ID.

Why should I partake in the study?

Parents provide very insightful information about the family system. With your help we can meet the study goals, enhancing the quality of parenting services and intervention for Hispanic families.

Please contact me if you are a mother:

- of a child of 6-11 years of age attending school
- living with the child
- of a child that qualifies for Free or Reduced school lunches
- that self identifies as Hispanic, Latino, or of Spanish origin
- in agreement for participation in the study

Eligible participants will receive \$5.00 to say thank you for their participation.

Sincerely,

Melanie Rodriguez

Carta de Invitación

Estimado Padres:

Mi nombre es Melanie Rodriguez. Soy un estudiante de doctorado que realiza un estudio para su disertación de la Universidad de Walden. Estoy amablemente solicitando su participación en un estudio de investigación doctoral.

¿De qué se trata el estudio?

La intención es evaluar las influencias de los comportamientos parentales y el estrés de los padres en el desarrollo de los niños.

Si estoy de acuerdo en participar, ¿qué se me pedirá que haga?

Responder a preguntas en 4 cuestionarios sobre: los ingresos de su familia, su nivel educativo, etc.; su estrés personal; su relación con su hijo(a); y el comportamiento de su hijo(a).

¿Cuánto tiempo me llevará completar el estudio?

Aproximadamente 50 minutos

¿Se utilizará mi información personal?

La participación es completamente voluntaria y puede retirarse del estudio en cualquier momento. No se utilizará información personal y se mantendrá confidencial. Cada cuestionario será identificado por una identificación asignada.

¿Por qué debo participar en el estudio?

Los padres brindan información muy perspicaz sobre el sistema familiar. Con su ayuda podemos cumplir los objetivos del estudio, mejorando la calidad de los servicios de crianza e intervención para las familias hispanas.

Por favor contáctame si es usted una madre:

- de un niño(a) de 6 a 11 años de edad que asiste a la escuela
- que vive con el niño(a)
- de un niño(a) que califica para recibir comidas escolares gratuitas o a precios reducidos
- que se identifica de origen hispano, latino, o español
- que está de acuerdo para participar en el estudio

Los participantes elegibles recibirán \$5.00 para agradecerles por su participación.

Sinceramente,

Melanie Rodriguez