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Feasibility of a Social Emotional Parenting Curriculum Applied in an Early Head Start Home Visitation Program with Mexican Immigrant Families

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FEASIBILITY OF A SOCIAL EMOTIONAL PARENTING CURRICULUM APPLIED

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MEXICAN IMMIGRANT FAMILIES

by

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ABSTRACT

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Early social-emotional development is influenced by the experiences of the child
especially the parent-child interaction and relationship. Influences on the parent's ability to
provide nurturing enriched parenting experiences include the parent's past encounters with how
they were parented. The Building Early Emotional Skills curriculum (BEES) has a component of
self-awareness exercises that assist parents to understand personal parenting behaviors and
attitudes. The BEES framework is an infant mental health model with a specific focus on early
social emotional development. Curricula related specifically to early child social-emotional
development based on an infant mental health model is limited in the literature. However, early
childhood is an opportunity to promote parent-child relationships in high risk families that
support social-emotional development. The United States has a growing population of families
that include Mexican migrants, many of whom live in poverty with low levels of health care and
education. These high-risk conditions place Mexican migrant families in a vulnerable position
for poor health and development outcomes. Programs that address school readiness are prevalent
in the literature but few have been adapted or created to address the parenting needs of the
Mexican migrant culture to promote early childhood social-emotional development. The purpose
of the research was to determine the feasibility of adapting and implementing the Building Early

Emotional Skills curriculum (BEES) with Mexican migrant families that include children from 3 to 30 months. The Bioecological Model (Bronfenbrenner & Morris, 2006) guided this study. The research took place in an Early Head Start program in the midwestern United States with a service delivery of home visitation. The sample consisted of Early Head Start home visitors and the Early Head Start supervisors who were bilingual Spanish and English speaking with a primary language of Spanish. The mothers in the study migrated to the United States from Mexico after the age of 18 years. The mothers' primary language was a dialect of Mexican Spanish. Data were collected through a parent questionnaire, adaptation and implementation focus groups with home visitors, and implementation logs completed by the home visitor. The curriculum activities were translated to the formal Mexican dialect of Spanish. The language presented a challenge due to the various dialects and slang terms used by the participants. Two areas of time constraints were identified, the limited time the home visitors had for their visits and the time required to fulfill the cultural role of the mother. The lessons/activities resulted in an implication for further adaptation that includes the cultural contexts of familismo, respeto, simpatico, and personalismo. The feasibility results were positive indicating implication for a pilot study.

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CHAPTER 1

Introduction

Although Mexican immigration to the United States has declined over the past decade, births to Mexican migrants living in the United States totaled 7.2 million (Passel, 2015; Taylor & Lopez, 2011). More than half of Mexican-American births (58%), between 2006 and 2010 were to Mexican immigrants (Taylor & Lopez). The Mexican migrant population has significantly added to the U. S. census, creating an aggregate of U.S. children with specific needs (Passel & D'Vera, 2011). Ramirez, Nava, Bermudez-Lobero, and Reyes-Miranda (2013) reported that 48% of U.S. Mexican migrants live in poverty, 53.5% lack health care insurance and 53% of Mexican migrant children do not receive regular health checkups. Poverty is associated with long-term threats to a child's development (Shonkoff, Richter, van der Gaag, & Bhutta, 2012). Likewise, Mexican migrants have a significantly higher lifetime prevalence of mood, anxiety, and substance use disorders than Mexican residents (Orozco, Borges, Medina-Mora, Aguilar-Gaxiola, & Breslau, 2013). Adverse experiences and stressors also put parents in a high-risk category for optimal parenting practices that support their child's social-emotional development. Thus, parenting practices play an important, protective role in the development of at-risk, young children.

Studies indicate that a positive maternal-child relationship and home environment buffers the effects of adversity on social-emotional development (Albrecht, 2016; Brophy-Herb, Zajicek-Farber, Bocknek, McKelvey, & Stansbury, 2013; Page, Wilhelm, Gamble, & Card, 2010). Early childhood parenting curricula with an emphasis on promoting maternal self-awareness, improving the mother-child relationship, and home environment, result in improved social-emotional development in early childhood (Bakersmans-Kranenburg, Van Ijzendoorn, & Juffer

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(2003); Barton et al., 2014; Kaminski, Valle, Filene, & Boyle, 2008; Raikes et al., 2014).

However, programs validated for European Americans are not always successful in engaging Mexican immigrant families (Calzada, 2010), and, in fact, there is a striking paucity of research on how parenting interventions aimed at children's early social-emotional development may be created or adapted to be culturally sensitive. The results of the current study contribute to the growing literature regarding culturally-sensitive parenting supports.

Problem

Although there is literature regarding early childhood social-emotional parenting curricula applied with the high-risk U.S. population, literature with Mexican migrant families is lacking. For example, a recent search revealed few references to social-emotional parenting curricula adapted for the Latino culture. Social-emotional parenting curricula were available for intended use with European and African American parents. However, such curricula were often applied with Mexican American families, despite a lack of attention to the cultural appropriateness or meaningfulness of the curriculum content. Most social-emotional curricula have not been tested with diverse populations which are a problem because parenting goals and practices vary across ethnicity and culture. Programs such as Early Head Start are charged with attending to culturally-sensitive programming given that they serve many minorities, at-risk populations, including Mexican American families.

Evaluation data from the Early Head Start Research Project (EHSREP; Love, Chazan-Cohen, Raikes, & Brooks-Gunn, 2013; Vogel, Xue, Moiduddin, Eliason-Kisker, & Lepidus-Carlson, 2010), a national evaluation of Early Head Start involving more than 3000 diverse families, underscores the ways in which the effects of parenting practices on children's outcomes may vary by culture. Using data collected from the EHSREP, Brady-Smith et al. (2013) found three similar mothering patterns for Mexican American, European American, and African

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American mothers; supportive (48%-52%), directive (29%-30%), and detached (14%-19%).

Harsh mothering patterns were identified in European American and African American mothers

but not in Mexican American mothers. Mexican American mothers scored 52% in

supportiveness, 29% in directiveness, and 19% in detached mothering patterns. Mean scores on

discrete mothering patterns differed across ethnic groups. Mexican American detached

mothering relative to supportive mothering was associated with decreases in emotional

regulation when children were 2 years old. Detached parenting is the lack of child awareness,

responsiveness, and interaction with the child (Jones-Harden, Denmark, Holmes, & Duchene,

2014). Mexican American directive mothering in relation to supportive mothering was associated

with decreases in child emotional regulation scores at 3 years of age. Detached parenting is

associated with poor emotional regulation (Jones-Harden et al., 2014). Brady-Smith et al. (2013)

found that Mexican American mothers practice authoritative parenting which is associated with

higher levels of externalizing and internalizing behavior in children (Calzada, Huang, Anicama,

Fernandez, & Brotman, 2012). Based on this the lack of culturally sensitive curriculum for early

social-social emotional in Mexican American families represents a significant problem.

Programs that include Mexican American families as clients require culturally sensitive early

social-emotional curriculum. Applying early social-emotional curriculum that was created and

validated with the European American families has been shown to not have long term effects for

the Mexican American family. Therefore, little is known about the cultural context of the family

in relation to social-emotional parenting strategies and interventions.

Significance of the Problem

Optimal early parenting in a child's early years is critical to healthy growth and

development. Maldonado & DiBello (2012) note that from birth to 36 months, children are

especially susceptible to experiences that influence their social-emotional development. Children

who experience parenting and interactions that are rich in nurturance, communication, stimulation, and creativity demonstrate a greater expression of social emotional skills and brain development (Barrasso-Catanzaro & Eslinger, 2016; Belsky & de Haan, 2011; Brauer, Xiao, Poulain, Friederici, & Schirmer, 2016; Brophy-Herb et al., 2011; Kok et al., 2015; Luby et al., 2012). At no other time in a person's lifespan will brain development occur at such a rapid pace than from birth to 36 months (Shonkoff, 2016). What happens during this period provides the framework for a person's social-emotional functioning throughout his/her lifetime.

Shonkoff (2016) reported that in the first 3 years of life, the number of synaptic brain connections double. Brain regions that are utilized have a greater potential for the growth of synaptic connectors in that region (Qiu et al., 2013). Experiences during early childhood determine which of the synaptic connectors will survive the process of elimination (Bick & Nelson, 2016). This points to sensitive and critical windows of opportunity that are dependent on the child's environment and experiences (Bick & Nelson; Shonkoff). Investing in children's early development improves the lives of individuals and the societies they live in (Fox, Levitt, & Nelson, 2010).

Based on this evidence, Healthy People 2020 has included social-emotional development as one of the developmental domains necessary for school readiness (Healthy People 2020 Summary of Objectives, n.d.). One of the objectives to meet the social-emotional developmental domain is to increase the number of parents who use positive parenting and communication (Healthy People 2020 Early and Middle Childhood; Objectives EMC-1, 2, (n.d.). The target goal for 2020 regarding positive parenting and communication is 76.8% of mothers will report positive parenting and communication to their primary care provider. In 2012 the objective for mothers' reporting positive parenting and communication with their child, to their primary care provider averaged 70.4% from a baseline in 2007 of 69.8% (Healthy People Data, 2012). Health

disparities concerning the objective for positive parenting and communication were 68.5% for families <100% below the poverty threshold compared to families 400+% above the poverty threshold at 72.0% (Healthy People 2020 Disparities Overview by Income, 2012). Hispanic adults living below the poverty level have over twice the number of reports of psychological distress (U. S. Department of Health and Human Services Office of Minority Health, 2016). However, the Healthy People 2020 domain for social-emotional development does not address culture and is not inclusive of evidenced-based information and recommendations for cultural groups (Healthy People 2020 Early and Middle Childhood; Interventions and Resources (n. d.). As the number of Mexican-American children born to Mexican migrant parents increases throughout the United States, culturally-focused intervention studies are needed. These interventions are important to provide competent health promotion and disease prevention. Recognizing and understanding differences in the Mexican migrant population is critical to assisting in the access to and utilization of services for families.

Significance to Nursing

The ontology of nursing depends on the identification, conceptualization, and application of evidenced based practice regarding phenomena of interest to nursing (Meleis, 2011). The identification of dominant concepts and theoretical frameworks guides nursing epistemology and practice (Fawcett & Desanto-Madeya, 2013). Ethical concerns in nursing include the ability of healthcare systems and community programs to provide culturally sensitive interventions that result in positive outcomes (Grady, 2014).

Cuellar (2016) noted that nurses have the responsibility to advocate for cultural inclusivity and diversity in the provision of healthcare. Understanding the health care needs of culturally diverse individuals and families requires further exploration to improve nursing care (Sobel & Sawin, 2014). Marrone (2016) states:

As the largest of the health professions in terms of numbers, nursing is well positioned to

influence change in health care and health care delivery systems nationally and

internationally. Transcultural nurses are uniquely positioned to both inform and transform

health care and health care delivery to diverse consumers. (p. 633)

A search of the literature resulted in few social-emotional parenting interventions that are

culturally sensitive to Mexican immigrant families with young children. The discipline of

nursing is concerned with concepts and goals that serve individuals, families, communities, and

populations to protect, promote, and optimize health and abilities (American Nurses Association,

2010; Fowler, 2013). Providing culturally sensitive curriculum and programs that address the

concept of social-emotional development in early childhood is congruent with nursing's

concerns. Nursing can influence policy, research trajectories, and program development

regarding the vulnerability of Mexican American children and the need for culturally sensitive

interventions.

Nurses play a significant role in the prevention of health disparities. Programs that

include interventions to improve social-emotional development provide primary prevention that

promotes development and productivity throughout a lifetime. Nurses have the expertise to

create intervention policies regarding social emotional development that close the gap between

diverse ethnic groups. Supporting programs that provide early childhood social-emotional

development parenting curricula gives nurses a platform for ensuring that evidence-based policy

is developed and applied.

Social-Emotional Parenting Curricula

In recent years, social-emotional parenting curricula have started to include more

emphasis on an infant mental health model. The focus on an infant mental health model includes,

in part, an attention to parents' own emotions, beliefs, and experiences that shape their

relationships with their children and their parenting. Despite that, there are few studies that included a combination of parents' emotion-related beliefs, behaviors, and regulations strategies to assess the cumulative effect on children's emotion regulation (Rogers, Castro, Halberstadt, MacCormack, & Garrett-Peters, 2016). Rogers et al. conducted a study to determine the influence of mothers' beliefs about the value of emotion and as a result the mother's behavior toward their child's emotional expression. The results of the study indicate that the mothers' values and expression of emotion toward the children predicted their children's emotional lability. Although the study was conducted with children ages 7 to 9 years, these studies may be applied to younger children as well. Studies were not identified in younger children. Rogers et al. report that the findings of the study indicate that child emotion expression and regulation are affected by parental socialization. Muzik et al. (2015) note that psychopathology and traumatic life experiences negatively influence family functioning. Thus, influences of psychopathology and traumatic life events interfere with the quality of the parent-child relationship and attachment. As a result, the child's social-emotional development is at risk. Muzik et al. tested the feasibility, acceptability, and preliminary outcomes of the MOMs Program (MP) with Mothers ($N = 114$) who were high risk for poor parent-child relationship outcomes due to traumatic life events, post-traumatic stress disorder, and mental illness. MP's key components are the importance of safety, trust-building, and enhancing self-efficacy through empowerment. The MP also includes skill building concerning self-care/mental health, problem-solving, emotion regulation, and parenting competence. The core of MP is to support parents' self-awareness of their own experiences and how they relate to parenting. The results were that participation in the MP was associated with a self-report of a reduction in depression, PTSD, and parenting helplessness and reflectivity. Self-awareness and attention to the effects of personal

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experiences contributed to an increase in sensitive mother-child interactions. The study did not measure the effects of the program on the child.

The BEES curriculum, which is the curriculum used as a foundation for the current study, has a strong infant mental health focus that strengthens the parent-child relationship resulting in positive child social-emotional development. The emphasis of the BEES is also on building parent awareness through self-reflection of parent temperament, stress, and experiences. The parent reflection includes self-awareness lessons and activities that encourage empathy for the child and insight into the how the mother's experiences, temperament, and stress affect the parent-child relationship.

BEES Curriculum

The Building Early Emotion Skills (BEES) curriculum was designed for implementation in home based programs. The focus of the curriculum is on promoting social-emotional development in children up to 36 months, through the building of parent-child relationships (refer to Appendix A for the content of the BEES curriculum) (Brophy-Herb et al., 2005). The BEES curriculum was developed and studied with predominantly European American and African American participants enrolled in Michigan Early Head Start programs. The BEES curriculum was developed by conducting focus groups consisting of primarily European American parents enrolled in Early Head Start (EHS), and EHS staff and was implemented by EHS home visitors. The focus groups concentrated on gaining an understanding of current needs regarding the emotional development of infants and toddlers (Brophy-Herb et al., 2005). The themes identified in the groups included: (a) roles of parents as advocates, teachers, and disciplinarians in supporting social-emotional development; (b) parental reflectivity about their own experiences as influences on their parenting in support of early emotional development; and (c) infants' and toddlers' abilities to have emotions and to be aware of others' emotions. Another

indicator that surfaced was the need for flexibility in the delivery and level of the curriculum to meet individual learning needs. These results provided a platform for the BEES to support the unique needs of the EHS population and staff in promoting early child social-emotional development (Brophy-Herb et al., 2005).

The domains of the BEES curriculum are: (a) building parental awareness, (b) listening to and interacting with the child, (c) identifying and labeling emotions, and (d) developing behavior regulation strategies (Appendix A) (Brophy-Herb et al., 2007). The curriculum is organized according to each of these domains, meant to build on each other. The domains are applied sequentially, with flexibility in the application of each activity within the domains. This supports the premise that the first domain, parental awareness, is essential to the development of the other domains. The activities within the domains are progressive from more concrete to more complex concepts, providing selection according to each parent's learning needs.

One of the primary goals of the BEES curriculum is empowering parents to take an active role in defining their parenting goals (Brophy-Herb et al., 2007). These parenting goals are used as a foundation and reference throughout the implementation process. These social-emotional parenting goals guide the selection of activities for implementation by the EHS home visitor. The curriculum also provides flexibility for the EHS home visitor and parent to choose activities from each domain. The BEES was adapted for the Mexican migrant population in the current study. The Mexican adaptation of the BEES is referred to as the M-BEES. Adaptation of the BEES for application with the Mexican migrant participants is discussed in Chapter 3.
The adaptation of the BEEs was guided by understanding influences of the Mexican American culture on parenting practices. Acculturation, depressive and anxiety symptoms were accounted for in relation to how they influence parenting and consequently the potential impact of the M-BEEs curriculum.

Early Head Start

One early intervention program is Early Head Start. The Early Head Start Program was designed to provide services to diverse populations in the United States, targeting school readiness. Head Start serves families with children from birth to 4 years old. Early Head Start is a component of the Head Start Program. Due to the success of the Head Start Program with children 3 to 5 years old and their families, the Early Head Start program was created in 1994. Early Head Start (EHS) is a federally funded program that serves low-income families with pregnant women, infants, and toddlers. Eligibility for EHS program is income-based, using the federal government's guidelines for poverty. However, each EHS program can determine eligibility based on the needs of the community. EHS program may tailor their programs to include specific populations in relation to these needs.

The mission of EHS is to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children, and promote healthy family functioning (Early Head Start National Resource Center, n.d.). Central to EHS is the social, emotional, physical, and cognitive development of infants and children from birth to 36 months. Critical to this principle is parenting education and the parent-child relationship. Services that must be included in each EHS program include: (a) early education services in developmentally appropriate settings, (b) home visits, (c) parent education and activities, (d) comprehensive health and mental health services, and (e) child care services either directly or through community childcare providers. Families are empowered through collaborative goal setting for themselves and their children. Plans include a focus on the child's developmental needs and the family's social and economic needs. Children with disabilities receive full services that meet their individual needs.

Services provided by EHS are either in center-based, home-based, or mixed models. The current study included EHS participants in the home-based delivery model. Home-based services

are provided during regularly scheduled meetings in the family's home (home visits). These services support child development and parent-child interaction. During the visit, the EHS home visitor applies parenting curriculum.

Parenting curriculum is chosen by the EHS program to meet the needs of the population they serve. Although there are many choices concerning parenting programs, EHS programs are required to match the mission statement, goals, and policy of the national Head Start program (National Head Start: Infant and Toddlers Program Design and Management, n.d.). The EHS program's goal is assisting families in promoting school readiness for their children. EHS does not have social-emotional development as a sole purpose.

Research Questions

The purpose of the current study was to investigate adaptation and feasibility for implementation of the original BEES curriculum as an intervention with Mexican migrant families and their children from 3 to 30 months of age. The adaptation of the BEES for the Mexican migrant population (M-BEES) was the first step in the current study. The next step looked at the feasibility to implement the M-BEES. The study was conducted with an Early Head Start program located in the Midwest. The research questions were:

1. What adaptations are necessary to apply the BEES curriculum (called M-BEES) to Mexican migrant mothers?

2. Is the implementation of the M-BEES feasible to promote social-emotional parenting skills and child social-emotional development in the Mexican migrant culture?

Theoretical Framework

Bronfenbrenner and Evans (2000) described the Bioecological Model as an evolving theoretical system for the scientific study of human development over time. The bioecological

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model was the guiding force behind the Head Start program. The purpose of the model is to guide research in creating new knowledge to influence policy and programs (Bronfenbrenner & Morris, 2006). Bronfenbrenner and Morris note that the model incorporates the concepts relevant to human development, as well as the processes and influences regarding human development. Using this context, the bioecological model was applied to define social-emotional development and parent-child relationship. The M-BEES curriculum and the EHS home visit was incorporated into the bioecological model's systems of environmental experiences. These environmental systems include the microsystem, mesosystem, exosystem, and macrosystem.

Bioecological Model

The bioecological model (Figure 1) describes internal and external environmental influences on the child's social-emotional development. The internal environment is represented by the child's neurological integrity and maturity and genetic makeup. The external environment is those experiences provided through the child's relationships with family, home, community, and governing agencies. These experiences can occur either directly or indirectly.

The Microsystem

The child is at the center of the microsystem. Bronfenbrenner and Evans (2000) defined the microsystem as a pattern of activities, roles, and interpersonal relations that take place in the person's environment. The microsystem represents immediate influences on the child's development. Microsystems include family, peers, school, neighborhood, and church. The child's experiences (activities, interactions, and roles) are the elements behind the microsystem.

The microsystem was the specific catalyst for the adaptation and application of the BEES curriculum, social-emotional development, and the parent-child relationship (Figure 1). The process of adapting the BEES took the parent's culture, communication, and cognitive abilities into consideration. This represents the internal and external environment of the parent's

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microsystem. For example**,** the first adaptation of the BEES was to translate the parent activity assignments from English to a formal Mexican dialect of Spanish that took into consideration culture, cognitive processing, and language. Further methods of adaptation are discussed in Chapter 3.

The Mesosystem

The second system in Bronfenbrenner's model is the mesosystem, which comprises the interrelations among two or more settings in which the child is an active participant (Figure 1). Children's primary relationships occur in the home, school, and neighborhood peer groups. Each mesosystem represents individual microsystems (Bronfenbrenner & Evans, 2000). The interrelations among the microsystems form the mesosystem. New mesosystems are formed with each new setting the child experiences.

The Early Head Start home visit takes place between the mother and the home visitor in the mesosystem. The EHS home visitor moves from the mesosystem into the child's microsystem (Figure 1). The EHS home visitor utilizes the M-BEES curriculum as an intervention with the parent who then applies the newly learned parenting skills with the child in a new way creating the child's exosystem.

The Exosystem

The child may experience another person's mesosystem indirectly through the interaction with that person. Bronfenbrenner and Morris (2006) define this experience as the child's exosystem. For example, the parents' place of work influences their thoughts and ideas, which in turn affect how they interact with the children. Some examples of an exosystem for a child might entail the siblings' school, parents' place of work and network of friends, or the local school board activities. Relative to the current study, the Early Head Start program is an

exosystem that is experienced by the parent within the mesosystem and by the child through a bioecological transition in the microsystem (Figure 1).

Bioecological Transition

When a person's position changes through relationships, activities, or roles their environment is altered. Bronfenbrenner and Morris (2006) emphasized that this ecological transition is a consequence and a result of development. Bronfenbrenner and Morris relate that an alteration in the environment can occur at any level of the bioecological system. Application of the BEES curriculum through a change in the parent-child relationship is a bioecological transition. The child experiences this bioecological transition in the microsystem as a catalyst to social-emotional development (Figure 1).

The Macrosystem

The macrosystem influences each of the systems and includes government, economy, political philosophies, and social conditions. Bronfenbrenner and Morris (2006) stressed that the experience of the macrosystem differs between groups, communities, and countries. Culture, values, economy, laws, and political structure affect the macrosystem. A child living in poverty may not be affected by the macrosystem in the same manner as a child living in affluence. As an example, the affluent child may experience the effects of tax laws while the impoverished child is affected by welfare reform.

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Bioecological Proximal Processes

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The core of the Bioecological model is process. Proximal processes that emphasize the importance of interaction between the child and the environment as the primary influence on social-emotional development are critical (Rosa & Tudge, 2013). Bronfenbrenner and Morris (2006) defined proximal processes as a complex reciprocal interaction that includes action, development, objects, and symbols in the immediate environment. Interactions must occur on a

regular basis for extended periods to be effective. These enduring interactions are the basis for proximal processes. Parenting is an enduring proximal process.

The context of the Bioecological Model theoretically refers to the objects and symbols applied in the proximal experience. The influence of the proximal process is dependent on time, which is optimally described as proximal processes that are consistent for extended periods of time. Proximal processes are the critical elements for development occurring within personal relationships (EHS home visitor and mother and mother and child), context (EHS home visit and the application of the M-BEES curriculum), and time (weekly EHS home visits and M-BEES curriculum intervention (refer to Figure 1 for a depiction of the current study's concepts and research process of adaptation, and feasibility for implementation explained by proximal processes).

Proximal Processes Applied in the Current Study

The child was the center of the study and therefore each bioecological system referred to will be from the perspective of the child. For instance, when the BEES was identified as being adapted in the exosystem it was the child's exosystem that was referred to. The bioecological model defines human development as a biopsychosocial phenomenon of continuity and change (Bronfenbrenner & Morris, 2006). This definition was applied to individuals and groups extending over the life course and over generations. Social-emotional development in children up to 36 months was defined as a dynamic individualized sequential response by the child to internal and external environmental experiences that were influenced by the child's internal biopsychosocial maturity and capability, driven by the family's internal and external environment, and reinforced by the implementation of the BEES.

For the purposes of the current study, the features regarding proximal processes that describe parent-child interaction are imbedded in the BEES including (a) provision of activities
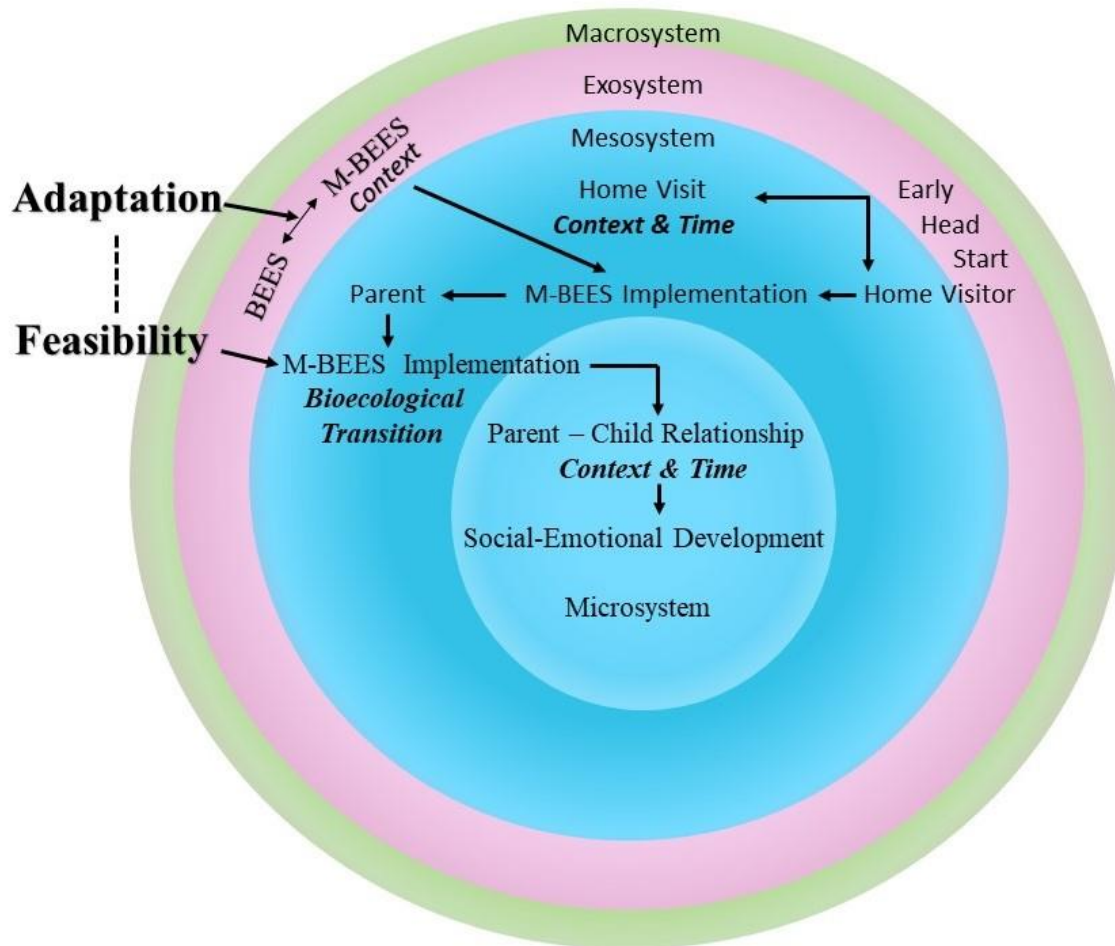
Figure 1. Depiction of The Current Study's Concepts and Research Process of Adaptation,

and Feasibility for Implementation Explained by the Bioecological: Proximal Processes.

and lessons, (b) activities are provided on a regular basis over an extended period, (c) activities

continue long enough to become increasingly complex, (d) reciprocal interaction occurs between

the child and parent, and (e) objects and symbols in the immediate environment invited

exploration, manipulation, elaboration, and imagination. In this description, parent-child

interaction encompasses a reciprocal process that occurs within the context of the BEES

implementation. Mothers who understand their children's developmental needs and the

importance of providing stimulation to meet those needs are successful in providing proximal

processes that support development. The intention of the BEES as a proximal process was as a facilitator of parent-child interaction that supports the child's social-emotional development. The mother provides motivating and reinforcing verbal and non-verbal communication in the application of lessons and activities learned through the BEES implementation that reinforces their child's efforts and successes.

Adaptation of the BEES. Adaptation of the BEES for cultural sensitivity represents the context of proximal processes. The parent and child's macrosystem influenced the adaptation of the BEES in relationship to culture. The context within the macrosystem encompasses culture in which members share value or belief systems. For these values and beliefs to have meaning to a developing person it must be experienced in the person's microsystem. Adaptation of the BEES required knowledge of the cultural values and beliefs for acceptance by parents who are members of the cultural group. Information regarding the experience of the culture with the BEES and methods to adapt the BEES for cultural sensitivity was initially gathered within the exosystem and mesosystem. The content of the BEES was evaluated initially by the cultural group which included parents and Early Head Start home visitors and supervisors. Translation of the BEES into the formal Mexican dialect of Spanish – Mexican Building Early Emotional Skills (M-BEES) was the first step toward adaptation. The adaptation was continuous as the M-BEES was evaluated for feasible implementation, refer to Chapter 3 for an explanation of the adaptation process.

Implementation feasibility of the M-BEES. Implementation of the M-BEES as an intervention was evaluated by the parents and home visitors in the mesosystem. Over time information was gathered from the parents and home visitors regarding the M-BEES intervention and the lessons relevance to and acceptance by the Mexican culture. The adaptation was then based on the information gathered from the mothers and the home visitors after the M-BEES

implementation, refer to Chapter 3 for details concerning the implementation process and for results in Chapter 4.

Within the context of the parent-child relationship, the expectation was that M-BEES would enhance parenting and parent-child interactions, and, hence, contribute to children's early social-emotional development.   Existing literature suggests that the concepts addressed in BEES, such as parental sensitivity and parents' emotion socialization practices are related to young children's social-emotional competencies (Beck, Kumschick, Eid, & Klann-Delius, 2012; Blair et al., 2015; Boldt, Kochanska, & Jonas, 2017; Brophy-Herb et al., 2013; Ellis, Alisic, Reiss, Dishion, & Fisher, 2014; Liew, 2012; Trentacosta & Fine, 2010; Sharkins, Leger, & Ernest, 2016; Ursache, Blair, & Raver, 2011; Valiente, Swanson, & Eisenberg, 2012). Given the small scope of the study and challenges faced during the participant recruitment process, it was not possible to assess associations between BEES participation and parents' and children's outcomes.

Conclusion

Applying theoretical frameworks that address the environment, social-emotional development, and the parent-child relationship, contributes substantive concepts and processes that provide clarity to Mexican migrant families. The Bioecological Model represented and explained influential systems and processes in a child's social-emotional development. The environment represented in the Bioecological Model considers the internal and external representations of the child, parents, and siblings. High-risk internal and external environmental influences exist within Mexican migrant families. Interventions that target caregiver-child interaction strengthen social-emotional development. The current study provided a social-emotional parenting curriculum that addresses cultural influences specific to the Mexican migrant population.

A review of the literature in Chapter 2, includes early social-emotional development, the role of parents and family, cultural influences on parent and family roles, social-emotional parenting curricula, parenting curricula adaptation attempts for cultural sensitivity, the relevancy of cultural roles in adaptation and application and barriers to implementing culturally sensitive parenting curriculum. Chapter 3 provides methods for the study, Chapter 4 includes the analysis of the results, and Chapter 5 concludes with a discussion of the results.

CHAPTER 2

Literature Review

This review of the literature begins with the importance of early social-emotional development in early child outcomes. Research regarding the role of culture, parents, and family, and the influences that affect social emotional parenting skills is presented. An examination of parenting curricula that includes early social-emotional development components was reviewed. Home visitation as a treatment modality is presented with relevance to the child's microsystem and environmental experiences of process, context, and time (Bronfenbrenner & Morris, 2006). The conclusion emphasizes culturally sensitive adaptation attempts and the relevancy of cultural roles in parenting curricula.

Search Strategy

A literature search of data banks CINAHL, Education Research Complete, ERIC, Google Scholar, PSYCHARTICLES, PSYCHINFO, and Sociological Abstracts included peer reviewed literature between January 1, 2010, and May 1, 2017. Key search words included: (a) early social-emotional development, (b) emotions, (c) socialization with subheadings of growth and development, (d) mother-child relations, (e) maternal sensitivity, (f) mothers, (g) building early emotional skills, (f) curriculum adaptation AND early childhood, (g) parenting curriculum AND early childhood, (h) early childhood AND school readiness, (i) Mexican American AND parenting curriculum, (j) social skills, (k) Hispanic Americans, (l) Latino Americans, and (m) Mexican Americans, (n) culture AND parenting, (o) culture AND early child curriculum, (p) ethnicity AND parenting, (q) ethnicity and early child curriculum, (r) ethnicity AND early child socialization, and (s) ethnicity AND early child emotion development.

The criteria for inclusion were: (a) adaptation of curricula or programs to reflect the culture (Mexican, Hispanic, Latino/a), (b) social-emotional parenting curricula applied with

specific ethnic groups (Mexican, Hispanic, Latino/a), and (c) early childhood curricula studies

that examined the effects of the maternal-child relationship on early social-emotional

development. Articles were excluded if they focused on children who were preterm and

programs that did not include the parent as the primary participant in learning early social-

emotional parenting skills.

The search resulted in the following literature (a) early social-emotional development

outcomes, 11 studies; (b) role of parents and family, 8 studies; (c) cultural influences on parent

and family roles, 21 studies; (d) social-emotional parenting curriculum, 17 studies; (e) parenting

curricula adaptation attempts for cultural sensitivity, 7 studies, (f) relevancy of cultural roles in

adaptation and application, 11 studies, and (g) barriers to implementing culturally sensitive

parenting curriculum, 5 studies. A review of the above literature is provided and organized

according to the evidenced based social-emotional concepts they support in the following

sections. Appendix B provides an evidence table for the literature applied to support the current

study.

Early Social-emotional Development

Children who experience risk factors concerning safety, poverty, and lack of provision

for basic needs are at risk for poor developmental outcomes (Coleman-Jensen et al., 2013;

Eamon, 2001). These poor developmental outcomes include social-emotional milestones that are

related to academic and social success (Blair et al., 2015; Trentacosta & Fine, 2010). For

instance, children who demonstrate early social-emotion competence, particularly self-regulation

not only have better academic outcomes but also have better relationships with teachers and

peers than children lacking these skills (Liew, 2012). A child's developmental outcomes are

influenced by early emotion-regulation through the ability to modulate emotions and behavioral

states. Therefore, children's early understanding of emotions contributes to their later positive

development. There are several ways in which early emotion-regulation contributes to children's academic and social successes.

Children who reach early social-emotional developmental milestones can regulate emotions that cause distress and enhance emotions that are satisfying and motivating resulting in effortful control. These children can manage conflicts with peers more successfully (Blair et al., 2012), are rated to be socially-competent by teachers (Ursache et al., 2011), and demonstrate attentional capacity, which promotes academic success (Valiente et al. , 2012). Self-regulation, and accompanying attention control, allow the child to attend to environmental cues and respond effectively (Trentacosta & Fine, 2010). In infancy and toddlerhood, early self-regulation takes the form of behaviors such as attending to parental vocal and facial cues (Feldman, 2012; Maclean, Rynes, Aragon, Caprihan, Phillips, & Lowe 2014), using self-soothing (Crugnola et al., 2011), such as thumb sucking, voluntarily shifting attention (Johansson, Marciszko, Gredeback, Nystrom, & Bohlin, 2015), and seeking assistance from parents and caregivers (Bridgett et al., 2011). Over time, these initial strategies diversify into more complex regulatory behaviors that eventually enable the preschool aged child to effectively manage his/her environment (Blair et al., 2015). Children's experience and attainment of emotion knowledge in conjunction with regulatory competencies contribute to positive developmental outcomes. An example of emotion knowledge is the child's ability to recognize emotions in themselves and others (Ensor, Spencer, Hughes, 2010). For instance, several studies show that early exposure to emotion talk such as parental labeling, conversation about cues, and contexts of emotions are related to toddlers' behavior competencies (Brophy-Herb et al., 2013). Children's use of emotion vocabulary is predicted by parents' mental state talk (talk about children's emotions, thoughts, feelings) in infancy and toddlerhood (Meins, Fernyhough, Arnott, Leekam, & de Rosnay, 2013).

During infancy and toddlerhood, the parent-child relationship is a critical and primary

context for development. Social-emotional development is shaped by relationships and ongoing interactions experienced in everyday family life. Secure parent-child attachment relationships play an important role to long term developmental outcomes, which is represented in the literature by a wealth of research (e.g., see Boldt et al. 2017). For example, children with insecure attachments demonstrate greater externalizing behavior problems and poorer parent relationships over time (Crugnola et al., 2011). Parenting that promotes a positive relationship through nurturance, sensitivity, contingent interaction, stimulating activities, and enriching emotional talk provides a positive environment that supports early social-emotional competence. The positive outcomes associated with the parent-child relationship indicate the need to understand the parent role in the context of the family before creating and implementing early social-emotional interventions.

The Role of Parents and Family

Within the context of optimal family and parent-child interactions, children learn to relate successfully to others, and, over time, to manage and express emotions. Therefore, incorporating parent and family roles and how they influence a child's early development is an imperative component of creating early social-emotional curriculum. Morris, Silk, Steinberg, Myers, and Robinson (2007) proposed a tripartite model of emotion socialization, to demonstrate the process through which children learn about emotions. The three processes identified as central to emotion socialization and children's regulatory development were observation/modeling, parenting practices and behaviors, and the emotional climate of the family (including parenting style). The model explains socialization of emotional regulation (ER) in the context of family processes, relationships, characteristics, and the consequent family dynamics. ER is the interpretation and experience of emotion and the ability to adjust emotional intensity through internal and external processes, which mediate the experience, intensity, and expression of

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emotions. The desired outcome of emotional adjustment is to gain social-emotional competence. Incorporating ER processes in the context of the family relative to early social-emotion curriculum strengthens early social-emotional developmental outcomes. For the current study, the understanding of the context of the Mexican American family and how early emotional socialization occurs within Mexican American families provides a basis for the creation of interventions that are culturally sensitive.

Morris et al. (2007) point out that parent and child characteristics influence ways in which emotion is expressed and regulated. Parent characteristics include familial history, parent temperament, parent mental health, and the parents' reactivity and regulation of emotion. Likewise, the child's characteristics include developmental level, temperament, and reactivity to emotions. Children learn which emotions are acceptable and expected in the context of the family through observation as emotions are expressed within the family and parents respond to children's emotions (Morris et al.). When negative emotions are high in the family, negative emotions may be induced in the child. Morris et al. point to this as emotion contagion. Emotional contagion can also be caused by positive family emotional expression. Children reference emotional responses by observing their parent's response to situations. Children then model these responses when experiencing similar situations. Children are affected by parenting practices that exhibit emotional understanding and coaching by empathizing, validating, and assisting in labeling emotions. In contrast, parenting practices that demonstrate a lack of emotional understanding and coaching have a negative effect on children's ER. A family climate that is highly emotionally reactive, manipulative, and unpredictable, contributes to children's poor social-emotional competencies (Morris et al.).

The review by Morris et al. (2007) emphasized specific family contexts that are important to a child's early social-emotional development. These findings inform interventions and

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curricula that target positive family and child outcomes for early social-emotional development. Other literature that supports the family context and the relation to early social-emotional development will be reviewed.

Maternal contingent responsiveness to the child's cues provides a model for positive social behaviors as well as a platform for toddler's learning and practice of social-emotional skills (Brophy-Herb et al., 2011). Contingent responsiveness is dependent on the child's ability to send clear cues, the parent's sensitivity in recognizing the cues, and the parent's response to the child's cues. Central to this process of the parent-child relationship is a flow of communication between the mother and the child. Maternal sensitivity and verbal stimulation not only contribute to cognitive development but also influences early social-emotional development (Page et al., 2010). Maternal sensitivity when combined with verbal stimulation, has a greater influence on early social-emotional development than maternal sensitivity alone (Page et al.).

In the everyday interactions with toddlers, there are several ways in which contingent responsiveness is uniquely related to children's acquisition of social-emotional competencies. For example, toddlers use words and gestures to express emotion and such gestures often elicit parent responses (Vallotton & Ayoub, 2010). In fact, parents often respond to a gesture with a corresponding word, such as labeling the toddlers' emotions and goals. Through these interactions, toddlers are encouraged to and build their expressive vocabularies, both in terms of words and gestures. For instance, early pointing frequency is positively associated with the development of later social-emotional concepts, including the number of unique concepts and the elaboration of concepts in play (Vallotton & Ayoub). Thus, parental responsiveness is a key component in early skill development.

In addition to responsiveness, more specific emotion socialization practices also have significant impacts on children. For example, parents' beliefs about emotions in young children

and their responses to children's emotions communicate power messages to young children about the role and value of emotions in the family. Parents' who hold emotion coaching beliefs (Lauw, Havighurst, Wilson, Harley, & Northam, 2014) view the expression of emotions as opportunities to help their children learn about emotions and how to manage their own emotions. Emotion coaching practices, such as labeling emotions are related to children's greater emotion recognition skills in preschoolers (Lauw et al.) and in older children (Castro, Halberstadt, Lozada, & Craig, 2015). When parents suppress emotions in relation to stressful events, children exhibit increased emotional lability (Eisenberg et al., 2010). A contributing factor to child emotional lability is the parent's expression of emotion (Spinrad et al., 2007). For instance, the parent's expression of contempt for and devaluing of the child's emotions, and the parent's reliance on emotional suppression socializes the child to respond with either emotional reactivity or emotional suppression (Luebbe, Kiel, & Buss, 2011). Supportive socialization efforts, though, promote children's abilities to regulate emotions, resulting in fewer behavioral problems and greater social competence (Rogers et al., 2016). Further, parental responsiveness mediates the association between parental emotional beliefs and children's social-emotional competencies (Brophy-Herb et al., 2011). Hence emotion socialization practices encompass beliefs and parenting behaviors that are central to the child's acquisition of competencies such as self-regulation and emotion knowledge.

Clearly, children develop social-emotional skills within the context of the family. However, research on the effects of parenting on social-emotional development has predominantly been conducted with European American and African American families. For the current study, it is necessary to understand the literature regarding the parent-child relationship and to determine how that relationship is expressed in the Mexican American culture. As an example, Mexican American mothers have been found to have a detached parenting style

(Brady-Smith et al., 2013) that may inhibit the mother from recognizing the child's words and gestures. Recognizing the child's words and gestures is necessary for the parent to respond contingently. Incorporating parent lessons and activities that focus on the parent's recognition and contingent response to their child's words and gestures provides a culturally specific approach to curriculum development for Mexican American families. To incorporate evidenced based constructs of the parent-child relationship in the early social-emotional curriculum for the Mexican American family, cultural meaning of family context and roles were explored.

Cultural Influences on Parent and Family Roles

The United States represents one of the most culturally diverse countries in the world (Vargas & Kemmelmeier, 2013). The diversity of beliefs regarding family, socialization, and parenting exist within each cultural group. Culture influences the family context, and the roles of family members in socializing emotion. Early social emotional curriculum developed for the Mexican American culture requires a representation of parent and family roles. To engage the Mexican migrant families in the implementation of curriculum, cultural practices must be recognized and addressed in social-emotional parenting curricula.

Oades-Sese, Esquivel, Kaliski, and Maniatis (2011) pointed out that limited research has focused on Latino populations and culture-specific risk and protective factors, despite the recognition of the importance of cultural understanding regarding early childhood development. One area that impacts the family context is how the culture views family roles, and individual family members' autonomy, as these constructs, varies across cultures (Vargas & Kemmelmeier, 2013).

European Americans accept individual family member's autonomy in creating their lifestyle separate from the family context. Latino American culture values family cohesiveness, endorsing family over individuality (Smith-Morris, Morales-Campos, Castaneda-Alvarez, &

Turner, 2012; Vargas & Kemmelmeier, 2013). Expectations that family members demonstrate loyalty, solidarity, and reciprocity are critical values (Calzada, 2010). *Familismo* values the nuclear and extended family needs above individual needs (Smith-Morris et al., 2012). Nuclear and extended family members and older siblings share in caring for the children. They also serve as counsel in child rearing and parenting practices. European American family culture, in contrast, encourages individuality within the family and separation from extended family in relation to parenting decisions (Smith-Morris et al., 2012; Vargas & Kemmelmeier). Individual family members' expression of autonomy not only breaks with traditional Mexican American cultural beliefs about family context but also is a sign of family disrespect and a break in family harmony. A pattern of noncompetitive devotion to family (familismo), harmony (simpatico), and respect (respeto) exists within the Latino/a family (Vargas & Kemmelmeier). Calzada, Huang, Linares-Torres, Singh, and Brotman (2014) point out that parenting programs with Latino families should approach familismo with caution, exploring the costs and benefits to the child's development. Familismo functions as a dynamic construct that moves along a continuum of costs and benefits, over time and across situations, with implications for children's development (Calzada, Tamis-LaMonda, & Yoshikawa, 2013). Interpreting and incorporating the costs and benefits of familismo related to socializing emotions within the family context contributes to cultural sensitive parenting curriculum.

Authoritarian parenting is a construct of familismo that supports cohesiveness over autonomy. Authoritarian parenting within the Mexican culture results in high adaptive behavior to authority in children. Parenting using the authoritarian parenting style is associated with higher levels of externalizing and internalizing problems in the home (Calzada et al., 2014; Ispa et al., 2013). Directedness is a construct of authoritarian parenting. During an activity, the parent directs the play rather than permitting the child to lead. Mexican American parents exhibit high

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levels of directedness during activities with their children. However, Mexican American children are acclimated to parent directedness, resulting in weaker reactions than European American, and African American children. Ispa et al. speculate that Mexican American children may believe that directive parenting is a sign of caring.

Mexican cultural values of familismo are exhibited in constructs of simpatico (harmony), personalismo (caring and giving to others), respeto (obedience to authority) and gender roles of machismo (male) and marianismo (female). Constructs of simpatico, personalismo, respeto, machismo, and marianismo identify the roles family members take. These constructs also influence the roles that extended family and friends take in the sharing of parenting.

In the context of the Mexican culture, children are socialized to gender rules that support familismo. In the Mexican culture, the birth of a boy indicates high prestige and value over the birth of a girl (Chuang & Tamis-LeMonda, 2013). Cultural considerations of machismo are that male offspring take care of the family, show valor with peers, work hard to raise money for the family, and take pride in raising children (Nuñez et al., 2016). Cultural aspects of female roles (marianismo) include taking direction from men, serving as the main source of family strength, and taking responsibility for the family's wellbeing and spiritual growth (Nuñez et al.). Children are socialized into familismo from infancy.

Simpatico is getting along and having a mutual understanding of one another. Practices of simpatico predict co-parenting and a positive emotional family environment in the Mexican American culture (Cabrera, Shannon, & Jolley-Mitchell, 2013; Sotomayor-Peterson, Figueredo, Christensen, & Taylor, 2012). Effective co-parenting includes agreement on childrearing issues such as discipline, education and peer affiliations, parental support for one another, and division of labor. Simpatico and personalismo increase collegiality and shared family support among extended family members and friends.

Respeto is an expectation of Mexican families. Children are expected to obey authority without question, defer to elders, follow rules, and control behavior (Calzada, 2010). Individualism is discouraged with an emphasis on family and obedience. These expectations play a key role in parenting practices. However, parenting practices in European and African American cultures promote assertiveness in questioning rules and authoritarian directives that threaten individual values, beliefs and decision making (Varela, Steele, & Benson, 2007). The contexts of Mexican American parenting identified point to the complexity and cultural interpretations of parenting practices concerning emotional socialization (Friedlmeier, Corapci, & Cole, 2011).

To provide a culturally sensitive social-emotional parenting curriculum, an understanding of how the culture views, experiences, and practices parenting are relevant to creating culturally competent strategies. Jahromi, Guimond, Umaña-Taylor, Updegraff, and Toomey (2014) reported that Mexican-origin mothers living in the United States had knowledge deficits concerning infant/toddler social development during pregnancy and when the children are 10 months, and 24 months of age, when compared to their U.S.-born counterparts. Jahromi et al. reported a relationship between the parental level of social domain knowledge and social development in their children. The Jahromi et al. study are one pertinent study among many that guide interventionist toward the importance of culturally sensitive parenting curricula. Familismo, simpatico, and respeto can strengthen the Mexican American family roles and practices. Early social-emotional parenting curriculum that incorporates familismo by including the extended family and even siblings that take on parenting roles is an example of cultural sensitivity in building parenting skills.

Acculturation is another important consideration for culturally sensitive parenting curriculum adaptation. Acculturation is the degree to which one culture adopts the values,

attitudes, and language of another culture. Perez-Rivera and Dunsmore (2011) found that

Mexican American mothers with less acculturation to the United States were more likely to

guide their children's emotions. Parents who are bicultural, holding onto their Latino beliefs in

conjunction with incorporating new parenting skills, have more warm and affectionate behaviors,

and fewer hostile, neglectful, and indifferent behaviors toward their children (Gassman-Pines &

Skinner, 2017). Early social-emotional parenting curricula applied with predominantly European

Curriculum developed for European Americans may not meet cultural considerations of

the Mexican American population, but the richness of the concepts and strategies to promote

social-emotional parenting is valuable. A review of social-emotional curricula created for

predominantly European American families is presented in the next section followed by a

selection of curricula adapted for cultural sensitivity with Mexican American families. These

reports of curricula were chosen due to the focus on early childhood and early social-emotional

development.

<center>**Social-Emotional Parenting Curricula**</center>

Social-emotional parenting curricula that has been developed for European American

families provides information regarding concepts and techniques that work with families of

young children. A review of 4 parenting curricula that serve families with children in early

childhood is provided to serve as a representation of the available curricula. Although this

curricula does not present culturally sensitive adaptation for the Mexican American culture the

research indicates positive outcomes.

Parents as Teachers

Parents as Teachers (PAT) is a home-based curriculum designed to support parents as

their child's first teacher (Parents as Teachers: An Evidenced Based Home Visiting Model,

2015). The primary focus of PAT is parent-child interaction, development-centered parenting,

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and family well-being. PAT serves parents with children from prenatal through kindergarten. Evidence of Program Effectiveness (2013) found that PAT had favorable outcomes for child development and school readiness, family economic self-sufficiency, positive parenting practices, and reductions in child maltreatment. Wagner and Clayton (1999) found that the PAT had persistently strong positive benefits to Spanish-speaking Latina mothers and their children, relative to English speaking Latinas and non-Latinas. Effects of the PAT had greater significance for families that also received case management services.

The PAT curriculum includes early social-emotional development, but this is not the primary goal. PAT does not address characteristics of the parent, such as stress and temperament that might impact the early social-emotional development of the child. PAT does not include lessons that focus on parent self-reflection regarding the parent's experiences and how they might influence parenting skills for early social-emotional development. PAT is available in Spanish, although evidence supporting adaptation with the Mexican migrant population was not available.

The Incredible Years Baby and Toddler Parent Program

The Incredible Years Baby and Toddler Parent Program (IYBT) emphasizes strengthening parent-child interactions, attachment, safety, reducing harsh discipline, promoting children's early social-emotional development and language skills (White & Webster-Stratton, 2014). The IYBT serves parents with children from 6 weeks to 3 years of age. The IYBT can be delivered in the home or in a group setting. The group setting is the preferred delivery method, due to parent support within the group. The parents and baby from 6 weeks to 1 year attend weekly sessions, lasting 2 hours for 10-12 weeks. The focus of these sessions is on engaging in baby practice time, in which parents learn to encourage babies' physical and language development, feeling of love and security, and providing a safe environment. During age 1 to 3

years, the parents attend the program without the toddler (who is in program sponsored daycare) for 12 weeks. During these meetings, parents learn how to: (a) use child-directed play, (b) use social-emotional coaching, (c) encourage language development, (d) teach self-regulation, and (e) teach friendship skills. Establishing routines, managing separations, and using positive discipline is also included. IYBT increased the parent-infant relationship and attachment (O'Connor, Matias, Futh, Tantam, & Scott, 2013) and increased the use of positive discipline among parents with toddlers (Perrin, Sheldrick, McMenamy, Henson, & Carter, 2014). Pontoppidan, Klest, and Sandoy (2016) did not find a significant effect of the IYBT applied to parents with newborns ($n = 30$) when compared to the control group ($n = 17$). However, in their study, the intervention group completed 6 sessions, which is less than the recommended course of 12 sessions for the IYBT.

Although the IYBT is available in Spanish, studies that applied the IYBT with Latino/a cultures were not found in the literature. Another concern with the IYBT is the parent classroom approach that excludes the child. Parents do not have the ability to interact with the child and apply newly learned constructs with teacher coaching. This method limits the ability to provide opportunities to strengthen the early parent-child relationship during the lesson.

Promoting First Relationships

Promoting First Relationships (PFR) is designed to increase responsive nurturing care that strengthens the relationship for parent-infant/toddler dyads (Spieker, Oxford, Kelly, Nelson, & Flemming, 2012). PFR has a parent self-reflective component that focuses on the deeper feelings and needs that underlie problems in the parent-child relationship. The self-reflective component assists the parent in recognizing the child's developmental levels. The mother is then able to recognize that the child's purpose of acting out reflects an unmet need. To identify these

unmet needs, parents are taught to read cues and identify missed cues, empathize with the child's distress, and reframe interpretation of the child's behavior.

Kelly, Zuckerman, and Rosenblatt (2008) applied the PRF with parent-child dyads with disabilities ($N = 14$) ranging birth to 3 years during home visitation, weekly for one hour, over a nine-week period. The home visitors ($N = 14$) were trained in the application of the PRF. The purpose was to increase the quality of the mother-child relationship. Mother-child interactions were videotaped four times over the nine-week period. To gain insight the mothers practiced self-reflection while viewing the recorded parent-child interaction. The results indicated improved early social-emotional parenting skills. The mothers were more sensitive to the infants, providing social-emotional and cognitive growth fostering and increasing contingency interactions. Children improved in responsiveness to their mothers, with greater contingent interactions.

Spieker et al. (2012) conducted a randomized trial of the PRF compared to a control group that received another intervention. The PRF group ($n = 105$) and the control group ($n = 105$) were in foster care placement, and the foster caregivers were included in the study. The study did not demonstrate that the children receiving the PRF intervention had improved security. A moderate effect size for increased caregiver sensitivity and sensitivity to toddlers was found with the PRF. Oxford, Marcenko, Fleming, Lohr, and Spieker (2016) continued the study to determine the effect of using the PRF with the parent and child upon reunification. The purpose of the study was to improve the parent-child relationship, for parents' better understanding of child behavior, and to reduce perceptions that the child was difficult and that the relationship was dysfunctional. The expectation was that observations of the parent-child relationship would result in improved parent sensitivity to the child, parental support, and decreases in parent reports of child behavior problems. There was no significant difference

between the PFR and the control group for these measures. Examining the non-significant results of this two-part study raises the question of the need for more specialized programs that target children in foster care and parents with significant parenting dysfunction that result in the removal of their children. Possibly a program that involves a clinical approach that addresses parental and child trauma and how this affects the parent-child relationship is required for a positive outcome. The Circle of Security program discussed in the next section provides two aspects of parent-child interventions: educational and therapy-based.

Circle of Security

The Circle of Security (COS; Cooper, Hoffman, Marvin, & Powell, 2000) is a relationship-based treatment with an emphasis on parent-child attachment facilitated by a professional. COS contains training for clinicians for assessment and treatment, and for professionals who use an eight-chapter DVD to educate parents and caregivers. The intervention uses a group treatment modality to provide parent education and psychotherapy based on attachment theory (Hoffman et al.). COS is designed for use with infants and toddlers. The COS curriculum includes parent reflection on a video segment of a staged interaction between a caregiver and child. The reflection includes viewing the interaction from the parent perspective and then utilizing an empathic approach to take the child's perspective of the interaction. The educator assists the parent and child to develop an attachment relationship characterized by parents' empathetic interactions that promote child self-regulation.

The COS assumes that problems with attachment are present within the parent child relationship; the primary focus of the COS is on repairing attachment. The overall emphasis is on components of social-emotional parenting, which is empathy for the child, secure caregiver - child attachment, and child emotional regulation. The COS is employed internationally and is available in multiple languages, including Spanish. The program has not been validated or

adapted for cultural sensitivity within ethnic groups, except for European American families. However, evidence in European American populations suggests effectiveness.

Hoffman et al. (2006) tested the group-based intervention protocol on toddlers and preschool children and their primary caregiver ($N = 65$) enrolled in Head Start and Early Head Start. Caregiver-child dyads were 86% European American below the poverty level and were identified as either having an insecure attachment or as at-risk for an insecure attachment. The participants received 20 weekly sessions. Individualized treatment plans and intervention protocols were developed for each participant. Hoffman et al. found that 70% of the participants shifted from an insecure attachment, with 66% moving toward a secure attachment.

Chaffin et al. (2006) were charged by the American Professional Society on Abuse of Children (APSAC) to examine current practices related to theory, evidence, diagnosis, and treatment of children described as having attachment related conditions and problems, and to make recommendations for action. This tasking occurred because of two coercive practices in attachment therapy that resulted in children's deaths. The report from the APSAC task force did not include criteria for their review. The APSAC is a nonprofit organization with a mission to meet the needs of professionals engaged in all aspects of services for maltreated and at risk children. APSAC is committed to providing professionals with evidenced based practice to treat and prevent child abuse and neglect. Although the COS does not endorse or include coercive practices, the Circle of Security does not meet the recommendation by the task force to include cultural issues when considering attachment. Chaffin et al. specifically recommend that cultural issues be considered in assessment and diagnosis and that interventions address cultural sensitivity. Chaffin et al. point out that cultural expressions of attachment and development may have different meanings to the culture, and that interventions based on other cultural practices may not be effective or acceptable. Although the current study is concerned with parenting

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curriculum and not therapy, it is important to note that the COS has a professional education curriculum that also does not address culture.

Summary

The curricula reviewed included aspects of concepts related to early social-emotional parenting skills. The focus on the parent-child relationship and specifically building attachment were essential elements of each curriculum. However, the PRF and the COS were designed for implementation after the identification of problems within the parent-child relationship. The PRF has a mental health focus and the COS is designed to provide psychotherapy as an intervention. Although, the focus on mental health and psychotherapy is a strength with parents who are identified as requiring a mental health intervention it does not provide a primary prevention approach. The PAT, IYBT, COS, and PRF did not include the parent's self-reflection on personal experiences and how they relate to the parent-child relationship. The PAT, IYBT, COS and PRF curricula are not specifically focused on early child social-emotional development. The primary goal of the curricula is on school readiness. The four curricula reviewed did not include cultural sensitivity with Mexican American families, specifically, the Mexican American family contexts of familismo, respeto, personalismo, simpatico, machismo, and marianism were not addressed. The strengths of the PAT, IYBT, COS and PRF curricula in relation to the Mexican American family is the availability of the curricula in Spanish. The PAT has positive outcomes for Spanish speaking families but variables that contributed to these results were not identified (Wagner & Clayton, 1999). The review of the PAT, IYBT, COS and PRF curricula validates the inclusion of exemplars in the BEES curriculum regarding early social-emotional development such as attachment, parent-child relationship, and parent empathy toward child behavior. These curricula inform the current study in relation to the need for early social-emotional development curricula that provides a global inclusion of specific early social-emotional exemplars.

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Quality early social-emotional parenting curricula that have been empirically validated with European American and African American populations are prevalent in the literature (Mistry, Biesanz, Chien, Howes, & Brenner, 2008). Traditionally, these programs have been applied to the Mexican migrant and Mexican American population (Karoly & Gonzalez, 2011; Mistry et al.). However, the literature points to important cultural differences in parenting styles in Mexican migrant parents. Interventions that recognize family values, beliefs, and practices of the target population have greater acceptance, participation, and better outcomes (Sanders & Kirby, 2012). Curricula that consider the connection between the parent-child relationship and cultural context improve acceptance with the target population. (Chaudhuri, Easterbooks, & Davis, 2009).

Relevancy of Cultural Roles in Adaptation and Implementation

The positive effects of preventative parenting interventions with European American families dominate the literature (Kaminski et al.2008). However, adaptation and application of preventative parenting interventions with the Mexican-American population are lacking. Parra-Cardona et al.'s (2012) study of the efficacy and fidelity of an adapted parenting program (Criando con Amor: Promoviendo Armonia y Superacion) with the Latino/a culture found that placing culture at the core of procedures contributed toward developing trust among participants. The level of trust contributed to high retention, participant satisfaction, and intervention completion. Parents in the study reported high satisfaction with the ability to reflect on the immigration experience and biculturalism. The parents pointed out that cultural themes have a profound impact on their parenting practices. Interventions with diverse cultures should include a collaborative process with the target population to identify the values, traditions, and cultural experiences that are central to their lifestyle.

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Parra-Cardona et al. (2009) conducted focus group interviews with Latina parents ($N =$ 83) to determine the participants' values related to cultural adaptation and dissemination of parenting interventions, and components required to increase motivation and satisfaction. The participants reported that they desired that contents of intervention curricula be relevant to the Latino culture and not exclusive to the European American culture. Categories identified were concepts of familismo, respeto, and simpatico, and their exemplars were important components required to motivate change in parenting and satisfaction. Familismo was explained as a component that emphasizes an instillation of values in children and inclusion of family. Respeto was explained as the expectation that children will obey authority and the family. Simpatico was represented in the desire to learn empowerment by helping one another with a community focus.

Domenech-Rodriguez, Donovick, and Crowley (2009) studied the cultural context of parenting with first generation Latino parents ($N = 95$). Acculturation was measured as 78.9% traditional Mexican orientation, and 17.9% bicultural Mexican and European American orientation. Latino parents demonstrated high levels of warmth, high demandingness, and medium to low acceptance of autonomy. Authoritarian, cold, and neglectful parenting styles were not identified in the participants. Traditional forms of parenting style identified with European American families only accounted for 33% of the families.

An ethnographic study was conducted by Parker et al. (2012) to determine how culture informs perspectives on parents' and children's experiences of emotion. Focus groups ($N = 12$) were assembled to represent same cultures. Although the Latino culture was not included in this study, the results demonstrated that emotions are not experienced the same in all cultures. A search of the literature did not find studies that examined the experience of emotions in Latino families. Parker et al. (2012) further emphasized the need to identify how emotions are

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experienced within the Latino culture. The focus groups' membership was divided by culture and consisted of 6 to 12 participants. The focus group leaders were from the culture. The parents (N = 87) were African American (n = 36), European American (n = 27), and Lumbee American Indian (n = 24). The results identified 18 themes that represented emotional experiences in the family. The study found similarities and differences of emotional experiences among cultures. The groups were similar in their high value of emotion. Three broad dimensions regarding the value of emotion were identified. These dimensions were the value of emotion, parents' role in the socialization of children's emotions, and the children's ability to regulate emotion. In addition, 18 themes and 8 subthemes were specified within 5 dimensions. The specificity of the results was not relevant to the current study and will not be discussed. The importance of reviewing this study is to identify cultural experiences on concepts relative to the adaptation of parenting curriculum. The Parker et al. study not only exemplifies the cultural concept of emotion and socialization of emotion but also identified exemplars as subgroups. The results provided rich content in which to create parenting interventions relevant to these cultural groups.

It is not enough to adapt existing interventions based on cultural presumptions associated with Latinos (Castro et al. 2015). In the context of parenting styles for inclusion in research and interventions, understanding and applying the differences within cultures is required for applicability. Bernal (2004) points out that cultural adaptation for good model program fit requires testing fidelity in the community. For the strongest contributions to preventative science, adaptation should be guided by a clear, culturally-informed theory, model, or cultural framework (Bernal). An understanding of barriers to culturally sensitive parenting curriculum is also important in providing knowledge of necessary steps in curriculum cultural adaptation (Castro, Barrera, & Martínez, 2004).

Parenting Curricula Adaptation Attempts for Cultural Sensitivity

A review of the literature regarding parenting curricula that have attempted adaptation for Latino/a cultural needs resulted in three studies that presented adaptation techniques and two studies that did not include adaptation techniques. Each of the five curricula reviewed reported positive changes in parenting skills. Although these programs may not all meet criteria for the age range and goals of the current study, it is important to note the similarities and differences regarding strategies used for successful adaption and feasibility.

Vesely, Ewaida, and Anderson (2014) reviewed 13 parenting education programs for Latino families with young children. They noted that despite the knowledge that parenting programs should address culture, few do. The goals of the review were to analyze parenting programs utilized by Latino families with young children, examine the cultural competence of the programs, and make recommendations based on the findings. Vesely et al. only reviewed programs that specifically targeted Latino families ($\geq 50\%$) with children between the ages of birth to 5 years. All the programs had published peer-reviewed evaluations studies. Vesely et al. found that curricula that included familismo, personalismo, and respeto provided improved adherence to the curriculum. Vesely et al. reported that 5 curricula reflected the the obvious incorporation of Latino cultural values and beliefs. The 5 curricula identified were included in a search and review of the pertinent literature for further detail of adaptation techniques. Following is a synopsis of the findings regarding the Criando a Nuestro Ninos hacia el Éxito Program, the Criando con Amor: Promoviendo Armonia y Superacion, Helping Our Toddlers, Developing Our Children's Skills Español, Nurturing Parenting, and Community University Initiative for Development of Attention and Readiness.

Criando a Nuestro Ninos hacia el Éxito Program

As a response to numerous requests to make the Parenting our Children to Excellence program available in Spanish, Dumas, Arriaga, Begle, & Longoria (2010) developed the Criando a Nuestro Ninos hacia el Exito (CANNE) program (Raising Our Children for Success Program). CANNE is a primary prevention program that addresses bicultural effectiveness at life skills for families, Latino/a assumptions, and priorities, and cultural beliefs concerning family, child rearing, respect, and interpersonal relations.

Adaptation. The first step in developing the CANNE was to ensure accurate translation into Spanish while maintaining the integrity of the original curriculum. Dumas et al. (2010) conducted three focus groups consisting of nine to ten mothers from the Head Start program with young children, 3-5 years of age. These mothers were Mexican immigrants with low levels of acculturation to the U. S. culture. The focus groups resulted in the isolation of specific cultural issues that the curriculum did not reflect: (a) Mexican immigrant mothers are more likely to use physical affection over verbal praise or tangible rewards, (b) physical punishment such as spankings is acceptable in the Mexican culture but not in the European American culture, (c) Mexican immigrant families tend to not set up family routines for reading, playing with their child, and bedtime, and (d) recognition of the barriers that Mexican immigrant families face.

Professionals (the meaning of professionals was not described in the article) with extensive work with Mexican immigrant families were also consulted regarding contents of the curriculum. The consultations resulted in similar themes as the mother's focus groups. The themes identified were family ties rather than the autonomy of the individual, respect for the parents as authorities, the use of physical punishment if considered abusive is against the law in the U.S., and that Mexican immigrants have a lower educational level and may be illiterate.

Adaptations to the CANNE were implemented based on the focus groups and consultations with the experts.

Implementation. After adaptation of the CANNE ongoing pilot studies using a mixed method within group design was conducted to determine the extent to which parents would participate and the benefits to the parent and child (Dumas, Arriaga, Begle, & Longoria, 2011). The initial pilot study consisted of 117 mothers and 7 fathers. The children ranged from age 3 to 6 years of age. Spanish was the primary language for 94% of the participants, and 79% claimed Mexico as their country of origin. Dumas et al. (2011) hypothesized that parents would attend regularly, report satisfaction with the content and improvement of their children's behavior and their parenting practices.

Acculturation to the U.S. was low, with 119 parents as first-generation immigrants with 83% traditional Mexican, and 7% slightly Anglo-oriented bicultural. Implementation of CANNE resulted in more than half of the participants receiving 87% of the program, reporting satisfaction in all areas. All the participants indicated they would recommend the program. Parents who participated in ongoing applications of the CANNE program reported increases in positive parenting practices, decrease in their child's externalizing behavior (hyperactivity and aggression), and an increase in children's social competence and communication skills (Dumas, et al., 2011).

Critique. A limitation to the CANNE program as it relates to the current study is that it was provided in a group setting and not as a home visitation intervention. There are prevalent poverty levels in the Mexican immigrant population, which make transportation a challenge. Home visitation models are more conducive than center based models to including family members in intervention training (Parra-Cardona et al., 2012). Another key area to note is that the age of the children (3-4 years of age) did not meet the age of opportunity at which the parent-

child relationship provides the greatest impact on child development. These children were also older than the selected age for the current study. Early parenting intervention strategies that focus on children from birth to 36 months were shown to meet the critical windows of opportunity in affecting development. Dumas et al. (2011) noted that translation to Spanish was the first adaptation of the curriculum, but did not state how various dialects concerning the Mexican immigrant were addressed. The adaptation did not provide a clear explanation of how the curriculum was translated into Spanish and if this was the formal Mexican dialect of Spanish or not. Due to the various dialects of the Mexican language in Mexico, it is important to document how this was managed.

Criando con Amor: Promoviendo Armonia y Superacion

Domenech-Rodriguez, Baumann, and Schwartz (2011) culturally adapted the Parenting Management Training – Oregon Model (PMTO; Dishion, Forgatch, Chamberlain, & Pelham, 2016) for application with the Latino/a population. The PMTO provides supportive services that include parenting curriculum on reducing externalizing behavior problems, serving families with children from 2 to 18 years. The PMTO has flexible delivery methods include home-based and center-based with services provided individually or in group settings. The purpose of the PMTO is to ameliorate family disruption and maladaptation. Although the curriculum is not focused on primary prevention in early childhood, the lessons demonstrated by a detailed description of adaptation and implementation testing provide an excellent exemplar of the cultural adaptation process. The following sections describe the adaptation of the PMTO, and the feasibility of applying the Criando con Amor: Promoviendo Armonia y Superacion.

Adaptation. The first step taken by Domenech-Rodriguez et al. (2011) was to rename the PTMO to reflect latino/a cultural values and language. The English translation of Criando con Amor: Promoviendo Armonia y Superacion (CAPAS) is Parenting with Love: Promoting

Harmony and Achieving. This title was derived from cultural values expressed by the parents regarding harmony, family, and a desire for children to achieve more that the parents. The first phase of the adaptation involved four steps: (a) collaboration between the treatment developer and the cultural adaptation specialist, (b) examination of fit of the intervention with the literature, (c) meeting with community stakeholders to identify needs, and (d) a needs assessment and gathering of information for adaptations. During the first phase, ten focus groups were held with parents ($N = 40$) to determine parenting goals and barriers. The content of the focus groups informed the changes to the process and content of the CAPAS. During the adaptation process, intervention fidelity to the PMTO was continually monitored for adherence.

In the second phase, the CAPAS was adapted based on the earlier focus group results and translated into Spanish. The translation was conducted by community members, and by a translator in Mexico City. Both translations were used to draft the CAPAS manual, and then the language was further revised by a psychologist in Mexico (refer to the section on Language Adaptation for more detail). Revisions to language were repeatedly applied based on research team meetings, focus groups, discussion, and parent reactions to words and content. The language was simplified and visual handouts were used when possible.

Implementation. The adapted interventions were evaluated for feasibility through two parent focus groups with twenty parents to determine satisfaction with content. The focus group recommendations were used to further adapt the CAPAS. During the third phase, the CAPAS curriculum was implemented with families ($N = 85$) and further adapted based on responses. The application of the CAPAS was delivered in a group format, once a week over eight weeks. Outcomes of the CAPAS were parent satisfaction, positive changes in parenting practices, and retention in the program.

Critique. Domenech-Rodriguez et al. (2011) utilized a Latino/a cultural adaptation expert in adapting the PMTO. The study did not explain who the expert was, nor how they became an expert. Due to the lack of definition of *cultural adaptation expert*, it is difficult for other researchers interested in replicating the strategies of adaptation to do so. Another area that was difficult in this adaptation, and identified in others, was an adaptation of the English language to a Mexican dialect of Spanish that can be identified by a good representation of Mexican migrants. An area that was not mentioned in the study was handout reading grade level, readability, and literacy of the population. The ages of the children in the study were not identified. Identifying age levels would increase the generalizability of the study results to specific developmental levels.

Helping Our Toddlers, Developing Our Children's Skills Español

Agrazzi et al. (2010) adapted the Helping Our Toddlers, Developing Our Children's Skills (HOT DOCS) for application with the Latino/a population. HOT DOCS is a behavioral intervention for toddlers and their parents. The emphasis in the curriculum is teaching caregivers a problem-solving model that address problem behaviors of their toddler and teaching the child appropriate behaviors. Since 36% of the families attending the English version of HOT DOCS were Spanish-speaking, a cultural adaptation was undertaken.

Adaptation. The initial adaptation consisted of translating the English version of the HOT DOCS manual, handouts, and program evaluation tools into Spanish. The translation was conducted by the research team, who were bilingual Spanish speaking. The dialect, or country of origin regarding the language of the translators, were not identified in the study. After the initial translation, the Spanish translation was validated by a bilingual English speaker. Throughout the pilot testing adaptation of words and phrases was conducted based on field notes regarding the parent participants' responses.

Implementation. Once the material was translated, a pilot test to further adapt and test the feasibility of the HOT DOCS was conducted with Latino/a caregivers. The pilot test consisted of 6 separate cohorts, ranging from 8-10 participants each ($N = 56$). During the pilot test, field notes were taken by the interventionist to reflect information concerning: (a) response to terminology and words not used by the culture, (b) reactions to content, (c) cultural values and beliefs in parenting expressed during treatment, (d) responses to specific case examples, and (e) response to authority. Post treatment measures were collected three months into the pilot testing. Based on teacher observations, field notes, and measurement findings, curriculum adaptation included: (a) an increase from 6 to 7 lessons, (b) language was simplified and adjusted for understanding and use, (c) cultural adaptations related to time flexibility, and (d) cultural beliefs of close interactions (personalismo) and family (familismo).

Regarding personalismo, it was noted that parents sought out socialization with each other by bringing food, exchanging numbers, and sharing personal information. To build on this strength, socialization time was incorporated into the lessons and an addition lesson was added to accommodate socialization. Time was also allotted during each lesson for the participants to share personal stories. Many participants entered the meeting late and an adaptation for time flexibility was applied, with an incentive for participants who arrived on time (a lottery draw for a $25 food gift certificate for all on-time participants).

To meet the cultural aspect of familismo, extended family was included in the lessons as secondary caregivers. The parents came from different Latino/a countries of origin, which resulted is different beliefs about parenting and dialect differences in the Spanish language. Language adjustment often took place during the class by the teachers' due to the diversity of language. Parenting beliefs were acknowledged without judgment, and the lesson was upheld as the accepted standard.

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After a year of application of the HOT DOCS Español, 97% of the parent participants agreed or strongly agreed that the curriculum was beneficial, that the lessons changed their parenting practices, and the program promoted positive interaction with their children. Results of the pretreatment and post treatment measures could not be analyzed, due to low return of self-report packets ($n =10$).

Critique. There was a low post-intervention response rate, therefore outcomes were not reported. The researchers provided a thorough testing and adjustments to the Spanish language by dialect when applying the curriculum. However, these adjustments would be ongoing and time consuming as the intended population was families from various Spanish-speaking countries of origin. Another concern regarding the adaptation of the curriculum for such participants from various Spanish-speaking countries was the differing cultural beliefs. Due to varying cultural beliefs about family constructs, the curriculum adaptation was difficult to generalize specifically to Mexican American families.

Nurturing Parenting

Devall (2004) reported adaptation of the Nurturing Parenting curriculum for application with Mexican-American families, but methods were not described. The Nurturing Parenting curriculum targets children from birth to 18 years of age. The Nurturing Parenting Program offers parenting education that targets primary, secondary, and tertiary prevention of internalizing and externalizing behavior. A review of the website offers multiple for-purchase programs, handouts, and games for purchase, but does not offer published peer-reviewed literature. The purpose of the Nurturing Parenting curriculum is to teach mothers self-nurturance and parenting skills. How or whether the curriculum was adapted was not explained in the article. In the adaptation of the program it was noted that cultural values were included in the curriculum, but how was not clearly described. The values stated were relationship-building,

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socialization, and family. The educators spoke Spanish and were bicultural Latino/a and American. Recruitment and retention relied on cultural values of relationship building. The material was available in a Spanish language handbook. How the Spanish dialects were addressed among various populations from different Spanish speaking countries was not addressed. The Nurturing Parenting study did not discuss cultural adaptation techniques other than language, therefore a critique of adaptation adequacy cannot be made.

Community University Initiative for Development of Attention and Readiness (CUIDAR)

Lakes, Vargas, Riggs, Schmidt, and Bard (2011) reported adapting the CUIDAR for implementation with the Latino/a population living in the United States. The CUIDAR serves high-risk families with children from birth to 5 years of age. The only reported adaptation of the CUIDAR was to provide Spanish-speaking educators and to translate the curriculum from English to Spanish. The authors did not provide information on the methods of translation or whether dialect was addressed. Lakes et al. referred to the participants as Latino/a but do not differentiate country of origin. Based on the location of the study (San Bernardino, CA), it is presumed that the participants were from Mexico. California's Latino/a population was 14,991,000, with 84% of this population of Mexican origin (Pew Report, 2014). Lakes et al. did not address the dialects of Spanish spoken by the Mexican immigrant in their education delivery or the written curriculum. Adaptation techniques were not explained in the study and therefore a conclusion regarding adaptation cannot be made.

Summary

The curricula presented are impressive for their attempts at cultural adaptation. Although, these programs addressed various aspects of familismo, respeto, personalismo, simpatico, machismo, and marianism they do not specifically address early social-emotional development and the importance of parent self-awareness and reflection to the parent-child relationship. The

adapted curricula's foci were predominantly on problem behaviors in early childhood and in parenting skills. The foci were not on prevention or on promoting the strengths of family cultural contexts to build early social-emotional parenting skills. Although familismo is a cultural construct, the curricula do not address roles of siblings and extended family in promoting early social-emotional development. Another cultural role in the Mexican American families is machismo and marianismo, which were not incorporated in the curricula adaptations. The adapted curricula did not address other cultural contexts of the family such as respeto, personalismo, and simpatico.

Self-awareness of past experiences and personal beliefs, such as beliefs about emotions, were not part of the curriculum adaptation discussion. Mexican American parents' focus is not on self-awareness, and how this promotes parenting skills. However, self-awareness is an important component of positive parenting skills. The adapted curricula did provide valuable information on the Mexican dialect of Spanish and the importance and rigor required to meet the demands for various dialects. Strategies for Mexican American family participation and retention were important to note in the areas of time constraints and the inclusion of social time.

Barriers to Implementing Culturally Sensitive Parenting Curriculum

To be effective, the adaptation of culturally-sensitive parenting curricula must include a deep understanding of the culture, acceptance of cultural values without judgment, and an ability to incorporate identified cultural practices to strengthen families (Bernal, 2004). One barrier to culturally-effective parenting curricula is an approach that focuses on acculturating the family to American values rather than incorporating cultural strengths and practices into the curriculum. The acculturation process begins once the family enters a new country as their attitudes and behaviors merge with a new culture. The acculturation experience is individualized to families' beliefs and desires to integrate values with a new culture (Ibanez et al., 2015). Understanding of

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both family acculturation to the United States and enculturation to Latino values are required to assess and promote early social-emotional development in families and children (Perez-Rivera & Dunsmore, 2011). Incorporating cultural practices is integral to parenting curriculum due to the contingency upon parents' successful acquisition and use of new parenting skills.

Barker, Cook, & Borrego (2010) used a social validity framework (Wolf, 1978) in the review of social acceptability of interventions within the culture. Using this framework, interventions were validated for the cultural importance of the goals, procedures, and outcomes. This framework demonstrated an effectiveness in approaching cultures with an appreciation of their beliefs and practices. It is important to note the importance that acculturation plays in addressing cultural beliefs.

Not all families within a culture adhere to cultural values in the same manner. Adherence to cultural values is dependent on acculturation and degrees of cultural identity (Barker et al., 2010). Addressing all members of a culture, in the same manner, demonstrates stereotyping, which presents a barrier to intervention implementation. An example of this is language preference of the individuals to whom the curriculum is delivered. In this area, the educator can make adjustments in the delivery of curriculum in either Spanish or English dependent on the preference of the parents.

Approaching a family without demonstrating values within the culture is a barrier to implementation of the curriculum. An example of this in Latino families is demonstrating respeto by using the last name to address the parent, and then asking how they would like to be addressed. It is also important to recognize respeto in how children interact with parents and connecting this practice to curriculum content through obedience and manners (Barker et al., 2010).

Karoly and Gonzalez (2011) conducted a literature review regarding early care and education programs (ECE) in affecting immigrant children's development. ECE programs were defined as early learning programs in the home- and center-based setting with families of children from birth to age 5 years. The results of the review indicated that immigrant children have a lower enrollment in ECE than children residing in their country of origin. Participation barriers included language, bureaucratic complexity, and distrust of government programs. Structural barriers included affordability, availability, and access to ECE. Cultural preferences for home services rather than center-based services were found to influence participation in ECE programs that only offered center-based services. The lack of services that present cultural acceptability and sensitivity were also identified as a barrier to participation in ECE.

The inclusion of familismo is strengthened when curriculum programs are delivered in the home. In the Mexican American family, the caregivers may include siblings, extended family, and even friends and neighbors. The cultural practice of familismo makes these caregivers a part of the family regardless of biological relationship. Delivery of center-based programs represents a barrier to Mexican American families' participation. Karoly and Gonzalez (2011) point out that these barriers can be minimized through the way publicly subsidized programs are structured. Their recommendation is that ECE programs limit barriers to immigrant families by increasing language-accessible communication in marketing ECE to immigrant communities, changing bureaucratic processes by streamlining paperwork, ensuring that paperwork is available in multiple languages, and refraining from requesting a parent's social security number. Another strategy suggested by Karoly and Gozalez is increasing the availability of program curricula that are culturally sensitive, and hiring educators that speak the language and understand the cultural practices. Closing the gap in ECE attendance and school readiness for immigrant families includes more than making ECE programs available.

Morelen and Thomassin (2013) used a socio-cultural perspective to review research ($N =$ 34) that examined emotion socialization in African American, Asian American, and Latin American families. Most of the reviewed studies utilized measures that were not normed within the cultures tested. These studies assumed that the measures and assessments used with European American participants applied to diverse ethnic groups, and did not look for metric variance among groups (Morelen & Thomassin). Limited information regarding acculturation, ethnic identity and multi-ethnic identity was not considered. The studies did not specify if the participants migrated to the United States or how long they had lived in the United States. Morelen and Thomassin conclude that the constructs of ethnicity reviewed are irrelevant to emotion socialization practices and related outcomes within these ethnic groups.

To minimize barriers to prevention and intervention with culturally diverse families, an understanding of contexts of cultural influences embedded in parenting practices and parent-child relationships is needed. Certainly, based on the identified barriers to cultural interventions a parenting curriculum specific to early social-emotional development in early childhood that overcomes barriers and includes culturally sensitive lessons is needed. It is not sufficient to assume that curriculum adapted for the inclusion of cultural sensitivity is enough. The adapted curriculum must be tested using culturally valid and reliable psychometric measures to report outcomes and fidelity.

Conclusion

Young children's early social-emotional competencies, such as regulatory skills and emotion knowledge, contribute to their later developmental outcomes. Importantly, understanding early social-emotional development requires an understanding of how development occurs with the family context. Cultural influences that affect the family context have direct influences on how children experience emotion and socialization through the parent-

child relationship. For successful curriculum implementation and outcomes with the Mexican immigrant family, the cultural constructs of familismo, respeto, simpatico are foundational concepts on which to build a culturally sensitive early social-emotional curriculum. Understanding applicable curricula applied with the Mexican American family requires consideration of acculturation and level of ethnic identity. Interventions that provide parenting to support the parent-child relationship for child early social-emotional development have positive outcomes (Beck et al., 2012; Blair et al., 2015; Boldt et al., 2017; Brophy-Herb et al., 2013; Ellis et al., 2014; Liew, 2012; Trentacosta & Fine, 2010; Sharkins et al., 2016; Ursache et al., 2011; Valiente et al., 2012). Three curricula were found in the literature that provided a description of how adaptation occurred to meet the cultural needs of the Latino/a population but was not specific for the Mexican immigrant population. These programs also did not address early childhood from birth to 36 months, nor early social-emotional development specifically. This results in a deficit of interventions that support early social-emotional development with Mexican migrant families. Understanding the cultural implications of early social-emotional development in the Mexican migrant family is critical to creating acceptable approaches that enhance parenting skills. Research that develops culturally-sensitive curricula for early social-emotional parenting skills in the Mexican migrant population strengthens and supports the foundation of the United States. In Chapter 3 the methods of conducting the research are described.

CHAPTER 3

Methods

Chapter 3 describes the design and methods of conducting the current study. Inclusion and exclusion criteria of participants and a description of participant sample are included. The Midwest EHS program and the EHS supervisors' responsibility and role are described. Methods and obstacles to recruitment and informed consent are reviewed as well as, procedures for data collection and data analysis. A description of the adaptation of the BEES to the formal Mexican dialect of Spanish is included.

Design

A feasibility study was conducted to adapt the BEES curriculum (M-BEES) for the Mexican migrant population and to explore the feasibility of implementation of the M-BEES (see Appendix A and Chapter 1 for a description of the BEES curriculum). Feasibility studies assist in providing evidenced based information that guide preparation for a full study on an intervention, which in the current study is the BEES curriculum. Bowan et al., 2009 note that there is a need to determine the feasibility of interventions for implementation with populations. The results of feasibility studies inform the researcher if the findings can be shaped to provide relevancy and sustainability for further study (Bowen et al.).   The current study included a feasibility approach which employed two areas of focus: adaptation and implementation. These two areas are represented in the research questions.

Question One: Adaptation

The following approaches answered the first question:

1. What adaptations are necessary to apply the BEES curriculum to Mexican migrant mothers?

Initially, the BEES was adapted by translating the parent activities from English to the formal Mexican dialect of Spanish (M-Spanish). The intention for further adaptation of the BEES was influenced by the analysis of the data collected from one EHS home visitor focus group and the M-BEES questionnaire. Once the data were analyzed, and the preliminary adaptation of the BEES was completed (M-BEES) the next question was addressed.

Question Two: Implementation Feasibility

Question two focused on the feasibility of the M-BEES:

2. Is the implementation of the M-BEES feasible to promote social-emotional parenting skills and child social-emotional development in the Mexican migrant culture?

The planned method for testing feasibility of the M-BEES was focus groups with the EHS home visitors post implementation of the M-BEES. Data were also collected regarding the M-BEES curriculum application dose, time, and parent response.

Sample

The participants in the current study included EHS home visitors and the EHS supervisors from one EHS program in the Midwest (see Chapter 1 for a description of the EHS program). The participants were also mother-child dyads enrolled in the EHS program. Following is a description of the sample starting with participant inclusion criteria and recruitment. This section will conclude with the protection of human subjects and informed consent.

Inclusion Criteria

EHS home visitors, supervisors, and mother-child dyads who met the inclusion criteria were recruited to participate in the study (refer to Table 1 for inclusion criteria).

Table 1

Inclusion Criteria

EHS Home Visitors	EHS Supervisors	Mother-Child Dyads
Bilingual in Spanish and English	Bilingual in Spanish and English	Mother born in Mexico
Home visitation with Mother-Child dyads who met the inclusion criteria	Provided supervision for EHS home visitors enrolled in the current study	Mother migrated to the United States at the age of 18 years or older.
		Child 3 to 30 months
		Enrolled in the EHS program

Recruitment

The Midwest EHS program director was contacted regarding participation in the study, November 2016. The director reported that 30 EHS mother-child dyads fit the inclusion criteria for the study. Written materials explaining the study methods were provided to the director. The study methods were reviewed by the director in a meeting with the EHS supervisors and staff. After answering several questions regarding the research methods, the investigator was notified that the EHS program would participate in the study. However, due to current demands on the EHS program, the research could not start for 6 months.

In May 2016, the investigator met with the EHS supervisors ($N = 2$) and EHS home visitors ($N = 10$) for a meeting that included a review of the research participant inclusion criteria for the mother-child dyads. The EHS supervisors met with EHS home visitors and the investigator regarding potential research participants (EHS mother-child dyads). The results of the discussion revealed that 10 mother-child dyads met the inclusion criteria for the study. The investigator had an ongoing dialogue with the supervisors to ascertain the availability of the potential mother-child dyad participants. However, throughout the next 4 months, additional EHS mother-child dyads who met inclusion criteria were not identified.

Additional Recruitment Attempts

The investigator attempted to identify further participants by contacting another EHS program in the state. The program director indicated that their EHS home visitors could not participate due to work demands. Attempts were made through the University Medical Center, director of nursing research, a prominent early childhood researcher at the University school of social work, and an Advanced Practice Nurse familiar with early child programs in the state. Other professionals knowledgeable about intervention programs in the state were also consulted. These attempts were unsuccessful in gaining participation in the research. The state does not have many EHS programs but instead focuses on supporting Head Start and preschool programs.

Informed Consent

Those EHS home visitors and EHS supervisors who indicated that they would like to participate in the study provided informed consent administered by the study investigator. Informed consent for the EHS home visitors and EHS supervisors was written at a 10th grade level in English. The EHS home visitors had either attended multiple college classes or had an undergraduate or graduate college degree. The EHS home visitors were reassured that if they could not participate in the study would be no impact on their employment.

Informed consent documents for the mothers were translated from English to Spanish using Microsoft Translator. The Spanish translation was reviewed for congruence to M-Spanish and back-translated to English by a translator. A translator who is certified at level four to provide translation to the Mexican dialect of Spanish reviewed the Spanish translation of the M-BEES for congruence to M-Spanish and conducted back-translation to English, for detail regarding translation refer to the section titled Translation to The Formal Mexican-Spanish Language.

The investigator obtained informed consent to the mothers, with a translator. The EHS home visitors provided a translation (when required) during this process as the investigator does

not speak Spanish. The investigator with the EHS home visitor ensured that the mothers received

and understood the expectations and nature of the study. Although the informed consent was

read to the mothers they also read along during the explanation. The mothers approached to

participate in the study were reassured that being a part of the study would not affect their EHS

enrollment, refer to Table 2 for participants by study method. The samples of the two methods,

adaptation and implementation are summarized in Table 2.

Table 2

Final Sample by Study Method

Method	Participants
Adaptation focus group	10 EHS home visitors
	2 EHS supervisors
Adaptation M-BEES questionnaire	3 EHS mothers
Implementation Logs	Initial
	• 4 EHS home visitors
	• 5 EHS mother-child dyad
	Mother-child dyad participant dropout
	• 1 after 2 months of implementation
	• 1 after 3 months of implementation
	○ Total of 2 dropped out before completing 6 months of implementation
	• 3 mother-child dyads completed 6 months of implementation
	○ 2 EHS home visitors completed the 6-month implementation
	As the mother-child dyads dropped out of the study this affected the EHS home visitors (assigned to them) from participation in implementation.
Implementation focus groups	Focus groups
	• 3 months after implementation 4 EHS home visitors, 2, EHS supervisors
	• 6 months after implementation 2 EHS home visitors, 1 EHS supervisor

Final Sample

All EHS home visitors ($N = 10$) who provide home visitation with mothers and children were given the opportunity to participate in the study. The EHS supervisors ($N = 2$) were also invited to participate in the study, an explanation of their role follows this section. The EHS home visitors ($N = 10$) and EHS supervisors ($N = 2$) were bilingual in a Mexican dialect of Spanish (primary language) and English. The EHS home visitors and one of the EHS supervisors were born in Mexico and migrated to the United States. The other EHS supervisor was born in the United States but learned Spanish as the primary language and English as a secondary language. They have completed college level classes in child development. Clear written and verbal instructions were provided at the time of obtaining informed consent, informing EHS home visitors and the EHS supervisors that participation in the current study would not affect their employment.

EHS supervisors' role. The EHS supervisors did not implement the M-BEES. The EHS policy is for the EHS supervisors to provide oversight regarding the EHS home visitor's job performance and the EHS program. The role of the EHS supervisors regarding the study was to provide the investigator with updates on a weekly basis as to the implementation of the M-BEES through the collection of the M-BEES Implementation log. The EHS supervisors also participated in the adaptation focus groups. One of the EHS supervisors did not participate in focus group 3, due to not having an EHS home visitor in the study at that time. The EHS supervisors have extensive experience in EHS home visitation with the Mexican migrant mothers and children. They also speak the Mexican dialect of Spanish as their primary language.

Mother-Child Dyads

Children and mothers from the EHS home visitor's caseload enrolled in the Early Head Start program who met the inclusion criteria were recruited to participate in the study. Each EHS home visitor explained the research to the family and inquired if they wanted to participate. The mothers' who indicated interest in participation were then given further explanation and informed consent by the investigator with the home visitor interpreting in Mexican dialect of Spanish as needed.

The mothers ($N = 8$) who consented to participate in the study were bilingual English and a Mexican dialect of Spanish with a Mexican dialect of Spanish as their primary language. The mothers completed high school. The average age of the mothers was 28 years old. The mothers immigrated to the United States from poorer regions of Mexico. The mothers lived with their spouse and children in rental housing. The children ranged from 8 months to 27 months of age, were born in the United States, and had siblings ranging from 5 to 13 years of age.

Protection of Human Subjects

The study was approved by the University of Wisconsin-Milwaukee Institutional Review Board as having minimal risk to the participants. There could have been minimal risk that some mothers exposed to the curriculum and measures may have concerns about their parenting and children. Parents were assured that the results of the research were used to study the curriculum and not a judgment on their individual parenting or their child's development.

The study presented minimal risk to the EHS home visitors and EHS supervisor participants. The EHS home visitors and the EHS supervisors received information regarding participation in this phase of the study by the investigator. The EHS supervisor emphasized that participation in the study was not a requirement. The EHS home visitors and EHS supervisors were assured that participation in the study did not affect their performance evaluations.

Setting

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The current study took place in one EHS program serving six counties in the Midwest, one was in an urban area with the other five in rural areas (Head Start Child & Family Development Program, INC., n.d.). The EHS program in the current study met the inclusion criteria of home visitation as a treatment method and services provided to Mexican migrant families (see Chapter 1 for a description of the EHS program). This EHS program was funded to serve one-hundred and forty families providing weekly home visitation. The Mexican migrant population served by the EHS program, at the time of the study was 6.9%. Center-based services are not provided by this EHS. The home visitation was conducted by an EHS home visitor who provided opportunities for families to receive; (a) an education, (b) health care, (c) mental health services, (d) dental care, (e) nutrition counseling, (f) transportation, (g) parenting classes, and (h) family services. This Midwest EHS program uses the Parents as Teachers program as a curriculum to be applied during the regular home visits. Next, a description of procedures delivered in the focus group and home visitation setting is explained.

Procedures

The procedures described in this section provide information regarding how research questions 1 and 2 were addressed regarding adaptation and implementation of the M-BEES. The first section of the procedures describes the adaptation of the M-BEES activities from the English language into the formal Mexican dialect of Spanish. The adaptation was assessed by conducting one focus group with EHS home visitors ($n = 10$) and EHS supervisors ($n = 2$) and the M-BEES Questionnaire answered by parents ($n = 3$) after the implementation of one M-BEES lesson/activity. The second section describes the implementation of the M-BEES for feasibility. Feasibility was assessed by two implementation focus groups conducted with the EHS home visitors ($n = 4$) and the EHS supervisors ($n = 3$) that occurred simultaneously with the implementation of the M-BEES.

M-BEES Adaptation

Marsiglia and Booth (2015) report that adaptation of interventions for cultural groups should not be conducted randomly but through a study that provides rigor. While adapting the intervention Marsiglia and Booth stress that methods that are systematic and include the selected culture in gaining their perspectives and values are critical. Interventions that are culturally adapted to the culture provide a good fit for implementation. Following is a presentation of the methods employed to gain a good cultural fit of the M-BEES curriculum.

Translation to the formal Mexican dialect of Spanish. The first step in the study adaptation was to translate the BEES activities into the formal Mexican dialect of Spanish (M-Spanish). The investigator utilized Microsoft © Translator to conduct an initial translation of the BEES Building Self-Awareness activities to Spanish. Microsoft Translator is a multilingual translation service embedded in Microsoft © Word Professional for use with written translation. Microsoft © Translator is also available for application with verbal translation as well as written translation. It is important to explain the meaning of the formal Mexican dialect of Spanish for clarity. For the current study, Microsoft © Translator in Microsoft Word Professional was utilized. Microsoft © Translator does not provide the Mexican dialect of Spanish for translation. The researcher conducted extensive searches for applications that provided translation from English to the Mexican dialect of Spanish without success. Each BEES activity was highlighted for selection then processed into Microsoft © Translator for translation into Spanish. The investigator then ensured that integrity of formatting was maintained.

The Spanish translation of the BEES was reviewed by a level IV certified Mexican-Spanish language translator whose primary language is a Mexican dialect of a Spanish and secondary language is English. To ensure the integrity of the translation a formal Mexican dictionary was used to validate that translation included the formal Mexican dialect of Spanish.

Once the BEES was adapted to the Mexican dialect of Spanish (M-BEES) a second translator conducted a back translation into English and compared to the original BEES, providing validation of the M-BEES for fidelity.

Adaptation focus group. Prior to the adaptation focus group the EHS home visitors and supervisors received training for implementation of the M-BEES, which is explained later under M-BEES implementation training. A meeting to further explain the M-BEES was set up between the investigator and the EHS home visitors ($N = 10$) and EHS supervisors ($N = 2$) who consented to participate one week before the EHS focus group. The meeting took place at the EHS conference room in the morning before home visits. Each EHS home visitor and EHS supervisor were given a copy of the M-BEES curriculum. The investigator provided a brief overview of the M-BEES, which included how the lessons were applied to the home. The EHS home visitors and EHS supervisors were given one week to review the M-BEES.

After one week of the M-BEES review, a sixty-minute focus group with the EHS home visitors ($N = 10$) and EHS supervisors ($N = 2$) consenting to participate was conducted. Focus groups increase the depth of the inquiry and reveal aspects of the study that would not be known (Doody, Slevin, & Taggart, 2013). The focus group took place at the EHS home visitor conference room in the morning before the EHS home visitors' regular appointments. The EHS conference room was private and easily accessible to the EHS home visitors. The conference room had a table large enough for 16-20 individuals to sit comfortably. The seating arrangement was rectangular enabling participants to see and hear everyone in the focus group.

The adaptation focus group with the EHS home visitors were recorded using two digital recorders. Before the meetings, the digital recorders were tested regarding function. Two recorders were used should one fail, a transcript was transposed by a professional transcriber from the recordings. During the focus group data were collected regarding language, culture,

interest, and literacy (see Appendix C for questions that guided the focus group). Before asking

the focus, group questions time was allocated for the EHS home visitors to provide a free flow of

thoughts regarding the implementation of the M-BEES. Creswell (2013) points out that data

obtained by focus groups provide experiential objective and subjective information from the

participants. To build trust the investigator must provide an atmosphere of acceptance without

judgement or critique (Creswell). This procedure encourages the participants to speak freely

regarding their experiences. The investigator did this through open ended communication, active

listening, and validation of the experiences. The investigator also used empathy which conveyed

acceptance and an attempt at understanding when frustration was expressed. These

communication techniques not only increase trust but convey that the focus group is a safe

setting to express experiences.

The EHS home visitor focus group questions were formulated to gain information from

the EHS home visitors and EHS supervisors perspective regarding: (a) use of the M-BEES as

curriculum, (b) perceived receptivity of EHS mothers to the M-BEES interventions, (c) obstacles

that prevented the EHS mothers from applying the BEES interventions, and (d) specific changes

needed to the M-BEES handouts to promote EHS family use.

M-BEES Questionnaire. The EHS home visitor conducted a lesson from the M-BEES

curriculum then gave one associated M-BEES activity to the participating EHS mothers. The M-

BEES lessons were chosen by the investigator to represent different areas of the curriculum. The

M-BEES lessons included Babies Feelings, My Child's Temperament, and Sources of Stress.

The M-BEES activities were selected to be appropriate for the mother-child dyad. The EHS

home visitors read and explained the use of the activity then requested that the mothers complete

the activity during the week. At the next home visit (1 week later) the EHS home visitor

reviewed that the activity was completed then completed the M-BEES Questionnaire by

interviewing the EHS mother (see Appendix D for the M-BEES Questionnaire). The M-BEES

Questionnaire asked questions that elicit the mother's ability to understand the activity

assignments, interest and enjoyment in the activity assignments, and the desire to perform the

activity assignments with the child. Each question provided an agree or disagree answer. For

those questions that were answered disagree an explanation was provided by the mother. The

EHS home visitors recorded the mother's explanation verbatim in the comments section of the

M-BEES questionnaire. The investigator reviewed the completed M-BEES questionnaires for

trends indicating the need for adaptation. The adaptation was not indicated by the mothers'

answers to the M-BEES Questionnaires. Feasibility of the M-BEES was then conducted by the

implementation methods for the study.

M-BEES Implementation for Feasibility

The EHS program offered home visitation as their only service delivery method. Each

EHS home visitor was assigned to a family according to a geographical location (territory). The

original BEES curriculum was designed for the brevity of use to accommodate other necessary

activities required during the home visit (Brophy-Herb, 2007). The EHS home visitors

conducted home visits with their assigned mothers on a weekly basis. During the home visits, the

M-BEES was applied and an implementation log completed (refer to Appendix D for the

implementation log). This section begins with a description of the implementation training,

explains the method of data collection using the implementation log, concluding with the M-

BEES implementation focus groups.

M-BEES implementation training. Before the M-BEES implementation, the EHS home

visitors and their supervisors received training from the investigator in the implementation of the

M-BEES curriculum. The M-BEES curriculum training and competency required four hours of

instruction. Competency was established through the investigator observation of the EHS home

visitor implementing the M-BEES curriculum during simulation in a classroom setting. A request for further training was made during implementation of the M-BEES. An attempt by the investigator to set up further M-BEES group training was unsuccessful due to the EHS home visitors' busy schedule. The investigator offered to accompany the EHS home visitor on visits to provide further individualized instruction but did not receive a response. The EHS supervisors provided supervision of the implementation of the BEES through chart review of documented home visits on a weekly basis. The EHS home visitors also kept a log of the specific sections and activities/handouts used during each home visit including lesson/activity, time, and parent response. The supervisors faxed the implementation logs to the investigator weekly.

M-BEES implementation log. The contents of the implementation log (Appendix D) included: (a) type of handout and worksheet, (b) amount of time spent by the EHS home visitor reading and explaining the material to the mother, (c) amount of time for the mother, or if indicated, the mother-child dyad to complete the activity, (d) response of the mother to the activity, (e) response of the child to the activity, (f) mother's understanding of the activity by appropriate application, and (g) child's ability to complete the activity (if appropriate). The EHS home visitors provided the perspective of the mothers regarding the implementation of the M-BEES. Verbatim comments made by the mothers in response to the implementation of the M-BEES were written in the M-BEES implementation log under response. The EHS home visitors turned in the log weekly to the EHS supervisors. The EHS supervisors gathered the implementation logs weekly and faxed them to the investigator.

M-BEES implementation focus groups. Implementation focus groups were planned for three scheduled intervals during the implementation of the M-BEES. However, due to time constraints, only two of the focus groups were completed. The implementation focus groups

were scheduled for sixty minutes. The implementation focus groups took place at the EHS home visitor conference room in the morning before the EHS home visitor's regular appointments.

The implementation focus groups with the EHS home visitors were recorded by the investigator using two digital recorders in the case of one failing. Before the meetings, the digital recorders were tested regarding function. Transcripts from the recordings were created by a professional medical transcriber and sent to the investigator. The investigator listened to the recordings while reviewing the transcripts for accuracy. The transcripts were reviewed by the EHS home visitors and the EHS supervisors and validated to be accurate.

To gather information early in the study regarding implementation the first implementation focus group was planned to occur at four weeks after the M-BEES implementation, the second implementation group at 3 months, and the third implementation group at 6 months. The implementations focus groups did not occur in that time frame and only two were conducted due to scheduling challenges. Therefore, the first implementation focus group was conducted at 3 months after implementation of the M-BEES and the second implementation focus group completed at 6 months after implementation.

Data Entry and Data Security

The investigator entered the data on an Excel spreadsheet. The investigator provided a second review of the data to ensure that entry into the excel spreadsheet is correct. The data files were located on the investigator's password protected computer. No other person had access to this computer and the files were locked. The paper copies of the screening instruments were placed in a specific confidential locked file in the data collector's computer in her office. The M-BEES curriculum implementation logs were stored in the investigator's locked file. Participant's names were not a part of the data entry instead data were entered by a numerical code. Consent forms and information linking subjects to data were kept in a separate locked file by the

investigator. The data were shared with the major professor who provided a cross-check for validity. The transcripts from the EHS focus groups were sent to the EHS supervisors and EHS home visitors for review of accuracy concerning dialogue recorded during the focus groups.

Data Coding and Analysis

Creswell's (2013) Data Analysis Spiral model was applied in the analysis of the qualitative data. Creswell stresses that qualitative data analysis requires a circular over a linear approach. The circular connotation refers to the method of reviewing and analyzing the data until the investigator is satisfied that saturation has occurred. The current chapter describes the method using Creswell's model of analyzing the data.

The first procedure in Creswell's model (2013) is data managing. Managing the data includes organization of the data by creating files and text units. Data for the current study included the adaptation focus group, the M-BEES Questionnaire (adaptation), implementation focus groups, and the M-BEES Implementation Logs. An Excel workbook was opened and saved with the file name of data and individual spreadsheets were created within the data Excel workbook with titles of M-BEES questionnaire, adaptation and implementation focus group codes, and implementation logs. Raw data were placed in the respective spreadsheet titles. The data were shared with the major professor who provided a cross-check for validity. The transcripts from the EHS focus groups was sent to the EHS supervisors and EHS home visitors for review of accuracy concerning dialogue recorded during the focus groups.

The second procedure in Creswell's (2013) model is reading and memoing. Creswell points out that qualitative research requires repeated reading of the data that includes writing memos to denote important codes which are a part of the conventional content analysis. The conventional content analysis is applied using an open coding method to describe a phenomenon, such as the response to the M-BEES (Hsieh & Shannon, 2005). The content analysis applies an

approach to data analysis without preconceived code ideas. Content analysis is especially beneficial when little is known about the phenomena (Hsieh & Shannon), in the current study the adaptation of the BEES for implementation with the Mexican American family. Open coding involves examining the data by comparing relations, similarities, and dissimilarities. Parts of the data are then labeled with codes to identify them for further analysis. This method was applied to the data from the adaptation focus group, M-BEES questionnaires (adaptation), implementation focus groups and implementation logs.

The third and fourth procedures in Creswell's model include interpreting and representing the data. Creswell (2013) reports that "Interpretation in qualitative research involves abstracting out beyond the codes to the larger meaning of the data" (p. 187). Each of the codes identified was described for meaning. Classification of the codes included a review of the data representing each code for interpretation. The interpretation of the codes was then represented for meaning in answering the current research questions.

M-BEES Questionnaires data coding. The M-BEES Questionnaires consisted of a response choice of agree or disagree, refer to Appendix D for a representation of the M-BEES questionnaire. The mothers ($N = 3$) participating in the adaptation phase of the study all answered agree to the questions. Although, the mothers were not required to provide further information if they agreed with the question, each of them made statements. The M-BEES questionnaire written responses were coded by a question and placed in an excel spread sheet. The data headings were coded by M-BEES questions resulting in codes of read, understand, interest, fun, and do with the child. Each response code included the mother's code and the M-BEES lesson/activity they completed. An Excel spreadsheet was used to organize all the data.

Adaptation and implementation focus group coding. The focus group data were analyzed for manifest content. Elo and Kyngas (2007) note that prior to starting the data analysis

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the researcher must decide on what type of data to analyze manifest and/or latent. Manifest data in focus groups include what is stated by the participants, while latent data is inferred by silence, sighs, laughter, and posture (Burns & Grove, 2005). To identify codes each focus group transcript was carefully read and highlighted when text appeared to describe reactions to either the adaptation or the implementation of the M-BEES. These codes were aggregated to form an idea concerning code identification. Notes were then written in the transcript margins when a keyword or phrase captured adaptation and/or implementation. Using open coding preliminary codes were then identified. The transcripts were then reread for further codes and to ascertain consistency for the preliminary codes. The data was then organized in an excel spreadsheet under the identified codes and color coded for focus groups (1, 2, and 3). It is important to note that information gained in the adaptation focus group also had to meaning for implementation.

Implementation log coding. The implementation log contents were entered in the data workbook in an excel spread sheet named implementation logs. Information obtained from the implementation logs were organized by participant code, lesson goal, lesson activity, time to complete the lesson in the home, mother response and child response. The contents were read and notes were taken to identify codes. The codes were compared with the codes identified in the focus groups for similarities.

Summary

Mexican American families enrolled in EHS and the EHS home visitors assigned to them agreed to participate in the research. Procedures to obtain data regarding adaption and implementation feasibility included the M-BEES Questionnaire, 3 focus groups, a meeting with the supervisor, and Implementation logs. Data collection took place over a 6 month time span. Data was managed using Creswell's Model (2013) to analyze and code the data. In Chapter 4 the data analysis results and codes are explained.

CHAPTER 4

Results

In this chapter the results of the current study are presented. The findings from the adaptation of the M-BEES Questionnaire and focus group are described. Next the findings from the implementation focus groups and implementation logs are provided. For the reader to have a better understanding of the current study's findings, a brief description of codes used to organize the data is provided first.

Code Descriptions

The codes identified in reading the data were not preconceived in that these codes developed through identification of reoccurring themes in the data. The description of the codes is influenced by the reoccurring data themes and what is already known about the parent, EHS home visitors, the M-BEES curriculum, and the EHS program. The codes identified include language, time constraints, activity, and research fatigue.

Language

The code language refers, in this study, to the understanding of the Mexican-Spanish written contents of the M-BEES activity. Language in this context relates to both adaptation and implementation of the M-BEES, for example adapting the language for better understanding and implementation feasibility. Spoken language does not apply to the study regarding adaptation and implementation as that was not identified in the data nor is it a concern in the current study.

Time Constraints

Time constraints refer to the limitation of time in applying the M-BEES. Time constraints are related to the expectation of the M-BEES regarding total implementation time of 10 minutes. Time constraints in the current study's findings are influenced by the time constraints allocated by the EHS program of 1.5 hours for a home visit. There are expectations by the EHS program

that certain activities and evaluations be performed including the primary PAT curriculum with the parent and child.

Activity

The activity is a component of the lesson and cannot be completed without delivery of the lesson contents. Therefore, the code of activity also represents the lesson application. In the review and analysis of the data, there were recurrent themes concerning the M-BEES activity. Activity was coded to these themes. The M-BEES lesson is provided during the home visit by the EHS home visitor. The EHS home visitor completes the M-BEEs lesson with the mother and then an activity is offered to the mother for completion prior to the next home visit.

Research Fatigue

The data from the first focus group with the EHS home visitors and supervisors indicated that the EHS home visitors were experiencing research fatigue. For the current study research fatigue refers to the number of research that EHS home visitors manage through home visits and family participation in the studies. This EHS just completed 6 months of research that required strict protocol including recording the home visit. The EHS home visitors were also required to complete paperwork. Research fatigue in this study although identified during the adaptation focus group does not have an indication for adaptation but does influence implementation.

<div align="center">

Adaptation

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The findings of the adaptation focus group and the M-BEES Questionnaires are in the following sections. The adaptation methods resulted in identified data codes of language, time constraints, and activity. Research fatigue was also identified although research fatigue is coded and discussed it is not considered a finding for adaptation or implementation due to the lack of significance in answering the research questions. The adaptation focus group will be described next followed by the M-BEES Questionnaire results.

Adaptation Focus Group

During the adaptation focus group, the participants were open and assertive. They readily expressed their opinion and experiences. The following describes a detail of the codes identified by the adaptation focus group, refer to Table 3 for the results of the adaptation focus group. Data analyses revealed the following major codes discussed next: language and lesson/ activity.

Language. The home visitors reported that the M-BEES handouts transcribed in the formal Mexican dialect were not accurate. One member reported the need to reorder the words to make the curriculum understandable. Another stated, "…and another thing it's the whole, the verb, the noun, is not in the correct order, it's just a disaster." However, the supervisor stated "The home visitors have problems with the transcription of our handouts because they do not like the Spanish. When she makes changes, she uses the Mexican dictionary just like your transcriber does but in Mexico there are so many dialects it is difficult to meet all of those needs." An EHS home visitor thought that the language was too formal noting: "Some of the words they were using were the formal words that are not very commonly known." An EHS home visitor stressed the importance of readability as one of her mother's shares EHS lessons with her monolingual Spanish (Mexican dialect) speaking husband showing him the activity.

Activity. Acceptance of the curriculum was positive. An EHS home visitor stated "I think it's definitely something needed for all Early Head Start parents, I mean, it's too bad we can't use it for more of them. I'm anxious to see all of the things that it brings". During the training, the EHS home visitors did discuss the concern that mothers would not have the time to focus on themselves. The EHS home visitors stressed that mother's responsibility is the family and that thinking about themselves is not something they practice.

Table 3

Results: Focus Group 1 for Adaptation, Coded Data

Language	Time Constraints	Lesson
"It didn't really make sense. Um, one, some of the words that they were using were the formal words that are not very commonly known,"	"Cuz like you said it's supposed to be ten minutes and a lot of times their visits are already really full"	"I think it's definitely something needed for all early head start parents, I mean, it's too bad we can't use if for more of them. I'm anxious to see all of the things that it brings"
and the other thing it's the whole, it's the whole, the verb, the noun, is not in the correct order, it's just a whole disaster."		
"The home visitors have problems with the transcription of our handouts because they do not like the Spanish and when our person tries to make like your transcriber does but in Mexico there are so many dialects it is difficult to meet all of those needs.		
When she makes changes, she uses the Mexican dictionary just like your transcriber does but in Mexico there are so many dialects it is difficult to meet all of those needs. "		
"Not the way that it is right now. I reorder the words and …the way that I know she is going to understand …she will get it or she will do it…"		

Research Fatigue. A final code that emerged in the adaptation focus group concerned research fatigue. Although fatigue is not necessarily related to adaptation of M-BEES, it certainly has implications for the emotional and time resources practitioners must devote to preparations for work with diverse families. It is from this perspective that this code is offered. This group voiced concern that they were doing another study so soon. The following are quotes from the two EHS supervisors: (a) "I think my, speaking of my five girls, I think they're all just thinking 'here we go again' because they're finishing up a research project right now…" and (b) "That they're not done with until the end of the month, so I think they're all thinking 'oh my God, we're never going to be done', so if they seem reluctant, I would say that's probably why because they've had to do a lot of paperwork and training for the last research and now they're going to be starting with another one. Not that they're not eager and excited, because they will be, but right now they're just like 'oh my God, we just want to be done with something, so…'".

M-BEES Questionnaires

A summary of the results related to the M-BEES Questionnaire is provided in Table 4. The mothers reported that they could read and understand the material with help. One mother reported that "I had trouble with the words, some were difficult." A second mother related that "My worker explained it to me." These statements represent the data code of language. One of the mother's thought that the activity was a repetition of what they already learn (My Baby's Feelings from Birth). However, the other two activities: (a) My Child's Temperament Strengths and Challenges: Supporting your Child's Temperament; and (b) Steps to Dealing with My Stress and My Feelings: Positive Mental Attitudes was reported by the mothers to be interesting, refer to Table 4 for the M-BEES coded data by question and activities.

Summary

The results of the adaptation focus group and M-BEES questionnaire indicated that an adaptation to the M-BEES lessons/activities was not indicated.

Table 4

Results: M-BEES Questionnaire for Adaptation, Coded Data

Codes by Question	Language	Language	Activity	Activity	Activity
	Question 1	Question 2	Question 3	Question 4	Question 5
Activity	I was able to read the parent handouts and worksheets	I was able to understand the parent handouts and worksheets	I found the parent handouts and worksheets interesting	The activities are fun	I would do the activities with my child
Babies' Feelings	"For the most part, yes, but it was repetitive the way it was worded"	"For the most part, yes, but it was repetitive the way it was worded"	"Yes, it gave some good information"	"It was OK"	"We already do similar activities"
My Child's Temperament	"I had trouble with the words some were difficult to understand."	"Some of it was hard to understand"	"Yes, my daughter is feisty"	"Good"	"Yes"
Sources of Stress	"My worker explained it to me."	"Yes, I have learned this before."	"Yes"	"Yes"	N/A

The mothers and the EHS home visitors reported that they liked the lesson content. The EHS home visitors thought that the content was necessary in teaching parenting to the mothers. Once the adaption procedures were completed implementation of the M-BEES started. The next section provides the results regarding the Implementation logs.

<div align="center">**Implementation**</div>

Implementation results were gathered through implementation focus groups, a meeting with the supervisors, and the implementation logs. This section provides an analysis of the implementation focus group codes of language, time, lesson and activity. The implementation log information includes goals and lessons chosen by the mothers, average time spent implementing the lessons, responses of the mothers, and completion of the activity assignments.

EHS Supervisor's Meeting

Due to the inability of the EHS home visitors to meet for a focus group four weeks after implementation, the EHS supervisors met with the investigator six weeks after implementation. The purpose of the meeting was to describe the EHS home visitors' findings during the implementation of the M-BEES. During the meeting, the supervisors took notes on the investigator's response which was then emailed to the EHS home visitors and the investigator. The supervisors meet with the EHS home visitors for a monthly staff meeting and throughout the week to provide supervision. The investigator also took notes which are included in Table 5, Implementation six Weeks Supervisor's Meeting. The supervisor reported that language continued to be difficult but that the EHS home visitors were providing the activities in English as their mothers were bilingual. The mothers were then able to choose between the English or Spanish versions. The EHS home visitors were having difficulty keeping track of which activities they completed as mothers were choosing activities in random order (the curriculum is

designed for this level of autonomy). It was suggested that they keep a copy of the

Implementation log to track the activities completed by each mother (original implementation

logs are sent to the investigator). The supervisors' indicated that the EHS home visitors

expressed that they would like to link activities to the current PAT curriculum used by the EHS

program. A request was made to keep with the application of the M-BEES curriculum by

permitting the mother to continue to choose activities. The home visitors indicated that some of

the M-BEES curriculum was geared toward infants. The investigator reminded the EHS home

visitors that the M-BEES curriculum for infants less than 3 months was excluded from the study

due to the age of the child. There was also a concern that paperwork on the implementation logs

was repetitive. The EHS home visitors were instructed to not repeat information but to refer the

reader to the information instead. The investigator followed up with the EHS supervisor one

week after the meeting and the EHS home visitors were satisfied with the suggestions.

Implementation Focus Group

Implementation focus groups were held at 3 months and 6 months after implementation.

A description of the codes identified after the analysis of the supervisor's meeting and the focus

groups content are described in the following sections and in Tables 6 and 7.

Table 5

Results: Supervisors' Meeting for Implementation Coded Data

Language	Time	Lesson/Activity
Translated materials are not in the dialect of the families, so difficult to understand. Home visitors are giving the English handouts to the families.	Prep time takes 30 minutes and takes 15-20 minutes to complete activity with the family	Stated that it is difficult to keep track of which activities they have completed because the families are choosing activities in random order in different areas.
		There are some activities that are very similar to PAT activities. Other activities are more difficult to link to what is already happening on the home visit.
		Home visitors felt like they would like more training on how to better implement the curriculum.
		Home visitors felt that some of the curriculum is geared towards infants.
		Paperwork can be repetitive within the activity and when documenting the visit.

Table 6

Results: Focus Group 2 Implementation Coded Data

Time Constraints	Lesson	Activity
"So we have been working on that part of it, but it takes like 15-20 minutes to do the things, goes over it with the parent, do the activity, and those 15-20 minutes,….."	"So, we have been working on that part of it, but it takes like 15-20 minutes to do the things, go over it with the parent, do the activity, and those 15-20 minutes, all of those activities have nothing to do with the child, so we're not focusing anything on the child, it is all about the parent and how they feel and their emotional part of it. What are we supposed to do with the child?"	"And then she doesn't do it. And then she is doing it right there when I get there…when she pulls out the paperwork and she is doing it."
"It's hard for her because she constantly gets interrupted, but she's not gonna get, so I don't think she feels like she is getting that much out of it either."	"So, like for her to sit down and for us to talk for 20 minutes about how she's feeling and how to manage stress, it's hard."	"And I like the activities, you know, the information"
"Name is trying to say we don't have much time and the visit is taking a long time we are supposed to be there for an hour and a half"	"I haven't flat out asked her, but she is like, she's honest, she's like 'I do this stuff here while you're here, but I don't have time to do it when you're not'"	So, do you write on here, 'mom didn't do the curriculum, she did it when I got in the house'?
"What do we can do? We cannot do anything because we only have an hour and a half, that's what they allow" "So, like that's why part of it was what is taking so long because I'm not going to, you know, we've already talked about the stress, blah, blah, blah, you know, what kind of things cause stress and then you have the activity that you're supposed to do, so it's kind of, it kind of is like two activities at the same time sort of…"	Well, until let me tell you the first part especially is geared towards the parent. "Ya, but I guess my thing is, okay, so we go there and we're supposed to be doing the activity with the child and the mom. That's the purpose of early Head Start…"	
"To a certain extent, because then she is also like 'okay, well I like some of the stuff, you know, take time for yourself when you've got three kids you don't have that much time to take for yourself', she gets home from work, I get there, we're doing the activities, she's got a junior high child that is trying to get her attention because he has emotional issues, so she's making sure he's okay, then she's got the 4 year-old, who also has ADHD and is running around everywhere and he wants her attention because he has been a preschool, he's been at daycare, and it's 6:30 almost 7 o'clock and the baby, who has also been at daycare, she is trying to make dinner, get him fed before he has to go to bed. It's kind of a chaotic time and she doesn't have any other time to deal with the visit."	"We're talking about the interaction between a parent and child. I'm spending a third of my visit almost just specifically on a parent for that part of it" I'm not either (laughter). I mean, I don't know, so you're asking me what I think part of the program and part of the fault is because I think that in the stress management part of it, it doesn't have any interaction with the child. I like, ya, the information, because you know it lets everybody know their temperament and then how they can deal with the kids and the kid's temperament, so it's nice, you know, to….."	
Name - "And we have to do our PAT activity and all our paperwork…"	"The thing is on one page it gives you all the information that you're supposed to talk to the parents about, so like I'm having to read this so I know what I'm talking about…"	

Table 7

Results: Focus Group 3 Implementation Coded Data

Language	Time Constraints	Lesson	Activity
There were missing materials, such as handouts and dvds. Translated materials are not in the dialect of the families, so difficult to understand. We gave the English handouts to many of our families that speak English.	"Not on their own, because like I'm telling you, when does this mom have time?" Prep time takes 30 minutes and takes 15-20 minutes to complete activity with the family The activities are taking longer to complete. So how much time do they have to themselves when they are done with the family they just pass out tired. The only thing I know we were having a hard time with was doing our curriculum at the same time. It was time consuming. It was harder. We ended up doing 2 activities.	It was hard to keep track of which activities they have completed because the families were choosing activities in random order in different areas. There are some activities we already do with our PAT activities. Other activities are more difficult to link to what is already happening on the home visit. This curriculum was about the parents and how they are doing and what their feelings are. We work on things like how to get your child ready for school. They are not used to thinking about themselves and stress that stuff. Their emotional thing and stuff. They are not used to that. It is a culture thing for instance use Name here. She has four kids – it is her birthday we want to give her a gift card but we have to tell her to spend it on herself or she spends it on her kids. Moms do not care what they wear as long as their kids have something to wear. For instance, my mother made sure her kids ate then my father she ate the food that was leftover you know there were 5 kids so not much left over. It is a culture thing mothers do not think about themselves. Well, you know When we have socialization the mother's talk. We sit down just having socialization during the week. While two kids were working together but one could not do it. The mothers talked and they taught her how to do it. Sometimes they meet for coffee after and then they take advice from one another. So having some form of socialization with the parents about the curriculum.	"The curriculum was hard to do. My parents stopped doing the curriculum when I asked them to do the activity homework during the week. It took too long to do it in the home but they did not do it on their own" We were doing great when we did the activities when I was there but when we asked the family to do the activity they didn't do it.

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Language. The Mexican-Spanish translation of the M-BEES continued to be an issue when implementing the activities. The EHS home visitors reported that mothers had difficulty with some of the words. They reported that for the mothers who could read English they provided the activity worksheet in English. Some of the statements by the EHS home visitors regarding the language included: "The Spanish part needs to be redone to tell you the truth and not by a computer but someone who knows how to translate" and "…Translated materials are not in the dialect of the families, so difficult to understand. "We gave the English handouts to many of our families that speak English".

The investigator requested that the EHS home visitors cross out the words the mothers do not understand on the activity assignments and replace it with a translation the mother does understand. Although the language was an EHS home visitor concern due to multiple Mexican dialects of Spanish, the mothers did not indicate a concern.

Time constraints. An area of difficulty expressed by the EHS home visitors was time taken in preparing to implement the activity. Some of the EHS home visitors reported taking up to thirty minutes to understand the activity. This was represented by the EHS home visitors stating, "The thing is on one page it gives you all the information that you're supposed to talk to the parents about, so like I'm having to read this, so I know what I'm talking about…" and "Prep time takes thirty minutes and takes fifteen to twenty minutes to complete the activity with the family". Other EHS home visitors agreed with these statements.

Time was also a factor in implementing the curriculum in the home. The implementation logs indicated that activities took from fifteen to thirty minutes. The following statement by the EHS home visitor represents this as a limitation "So we have been working on that part of it, but it takes like fifteen to twenty minutes to do the things, goes over it with the parent, does the

activity, and those fifteen to twenty minutes". Time was a concern due to the need to implement other required EHS home visit requirements as reported by these EHS home visitors "It's, uh, time-consuming. You definitely need to have, like, a designated time for it and it's not…if you're going to do like some of the stress parts, it can't be rushed, and because we have so much other stuff we're kind of having to rush it a little bit, so it…" "And we have to do our PAT (Parents as Teachers) activity and all our paperwork…" and "What can we do? We cannot do anything because we only have an hour and a half, that's what they allow".

Another barrier concerning time was the mothers' time to complete the activity both during the visit and on their own. This statement emphasizes the mothers' time: "Not on their own, because like I'm telling you, when does this mom have time?" and "To a certain extent, because then she is also like 'okay, well I like some of the stuff, you know, take time for yourself when you've got three kids you don't have that much time to take for yourself', she gets home from work, I get there, we're doing the activities, she's got a junior high child that is trying to get her attention because he has emotional issues, so she's making sure he's okay, then she's got the four-year-old, who also has ADHD and is running around everywhere and he wants her attention because he has been in preschool, he's been at daycare, and it's 6:30 almost 7:00 o'clock and the baby, who has also been at daycare, she is trying to make dinner, get him fed before he has to go to bed. It's kind of a chaotic time and she doesn't have any other time to deal with the visit".

Activity. Another lesson code that was identified, related to the mothers' inability to complete activity during the week. The mothers completed the activity if the EHS home visitor assisted her during the home visit but not on her own. When the EHS home visitors expressed concern about how long it was taking to complete the activity in the home it was revealed that they were also doing the mothers' activity during the visit. The investigator did a review of the

M-BEES curriculum implementation instructions and requested that the EHS home visitors follow the implementation instructions. The following statements reveal the results: "The curriculum was hard to do. My parents stopped doing the curriculum when I asked them to do the activity assignments during the week. It took too long to do it in the home but they did not do it on their own" and "And then she doesn't do it. And then she is doing it right there when I get there…when she pulls out the paperwork, and she is doing it." Although, the mothers did not have the time to complete the lesson they attempt to show respeto, personalismo, and simpatico by attempting before the home visit. The practices of respeto, personalismo, and simpatico are practiced with close relationships and authority (Vargas & Kemmelmeier, 2013).

The EHS home visitor verbalized concerns that the child was not included in the lesson. These concerns were represented by the following statements: "… all of those activities have nothing to do with the child, so we're not focusing anything on the child, it is all about the parent and how they feel and their emotional part of it. What are we supposed to do with the child?", "Ya, but I guess my thing is, okay, so we go there and we're supposed to be doing the activity with the child and the mom. That's the purpose of Early Head Start…", and "We're talking about the interaction between a parent and child. I'm spending a third of my visit almost just specifically on a parent for that part of it". These statements indicated the cultural explanation: "It is a culture thing for instance use (Name) here. She has four kids – it is her birthday we want to give her a gift card but we have to tell her to spend it on herself or she spends it on her kids. Moms do not care what they wear as long as their kids have something to wear. For instance, my mother made sure her kids eat then my father, she ate the food that was leftover you know there were five kids so not much left over. It is a culture thing mothers do not think about themselves" and "This curriculum was about the parents and how they are doing and what their

feelings are. We work on things like how to get your child ready for school. They are not used to be thinking about themselves and stress that stuff. Their emotional thing and stuff. They are not used to that".

The investigator addressed these concerns by explaining that what impacts the mother also affects her relationship with the child. The EHS home visitors did not accept this as important. The M-BEES curriculum is applied initially in a sequential topic order that includes concepts of stress and temperament. The lessons at first focus on the mother but conclude with an application to the child.

Implementation Logs

The results of the implementation logs were reviewed for codes, refer to Table 8 Implementation Log data. The average length of time to complete a lesson was 21 minutes with a standard deviation of 7 minutes. Initially, the mothers are guided to choose a goal related to the first section of the M-BEES curriculum: Building Parent's' Emotional Awareness. Out of 57 lessons implemented the mothers' ($N = 4$) chose self-awareness goals at a rate of 58% and child related goals at a rate of 42%. Goals chosen by the mothers to guide the M-BEES lessons centered on the concept of self-awareness in three exemplars, emotional awareness, temperament, and stress, (refer to Appendix A for a description of parent goals and how goals are chosen). The concepts represented by these goals were analyzed for total percentage of lessons completed resulting in stress 61%, Temperament 21%, and emotional awareness 18%.

Two other codes emerged in that mothers did not complete the activities assignments when asked to do them during the week and that the time to complete the lesson during the home visit was an average of twenty minutes. The EHS home visitor's time implementing the M-BEES decreased to 5 to 10 minutes when the mother was asked to do the activity as an assignment.

Table 8

Results: Implementation Logs Coded Data

Goal	Activity	Time	Mother's Response	Child's Response	Accurate completion	HV Comments	F/U of Previous Activity
Develop self-awareness	My Temperament Part 1	5 min	Mom took time to think about how she would react to stressful situations	the child got frustrated wanting mom's attention	Yes	Mom was uncomfortable at the beginning doing the activity but then she does better at it and completed the activity	Mom worked with child on copycat activity during the week
Recognizing child temperament	My child's Temperament	20 min	Mom was very into the activity Mom liked the handout because it confirms what types of temperaments each of her kids have.	Child was cooperative mom encouraged child to be involved	Yes	Mom enjoyed the activity	Mom continues to work on finding out what kind of temperament she has
Building parental emotional awareness	Home Hunt	35 min	Mom enjoyed the activity going around the house and watching her child's reaction	Child enjoyed the activity especially around the Kitchen area	Yes	Mom and child did a wonderful job completing the activity and staying on task	Mom finished the activity on types of temperament
Identifying my toddler's different strengths	Deposits to your child's feeling bank	30 min	Mom was very into the activity encouraging and praising child's efforts	Child was engaged on the activity, smiling and interacting with parent	Yes	Mom continues to be engaged with the child during the visit	Mom continued to play Home hunt with the child throughout the week
Listening and interacting with my toddler	Singing together/songs & finger play/baby's favorite songs	35 min	Mom was active during the home visit while doing the activity. Mom sang songs with her child in Spanish and showed him Spanish finger play	Child was happy, smiling, and interacting with mom	Yes	Mom did a good job using short clear words while signing and talking to the child	Mom continued doing the deposit your child's feelings bank
Understanding how stress can affect my toddler	Helping your child manage stress act 1/ signs of stress/tips for relieving stress	35 min	Mom was involved praising and encouraging the child	Smiling laughing with mom while doing the activity	Yes	Mom and child seem to have a good healthy relationship	Continue to play with the signing activity
Identifying and labeling	Feeling Books: Baby Faces	40 min	involved - encouraged child	Active making faces with mom	Yes	Mom and child did a good job during the visit	Continuing to help mom with stress activity?
Building parental	Parenthood myths Act	30 min	Mom was active and engaged with the	Child was engaged during	Yes	Mom is very good at completing the activities involved with the	Mom continues to use the feelings book throughout the week with the

emotional awareness	1/paring myths true and false		activity's handouts and responses	the activity time with mom		activities	child
Building parental emotional awareness	Other parenting/media parents	30 min	Mom talked about what she admires as a parent on TV and in real life	Child scribbling with the crayons and pens	Yes	Mom attentive and involved with her child and the activity	Mom continued to do the activity parenthood myths
Listening and interacting with toddler	stop and go signals	30 min	Mom was involved with her child during the home visit while doing the activity	Child was involved with mom during the home visit's activity time	Yes	Mom continues to be very involved with her child	Continue playing and doing the other parent activity
Listening and interacting with toddler	what my baby is telling me	30 min	mom was attentive and cooperated with the activity. Tried to focus on the signals that the child was telling her but mom was not feeling well	Child was walking around playing with mom Y	Yes	Mom was not feeling well but she made an effort to complete the activity	Mom continued to work with the stop and go activity but not everyday
Identifying and labeling emotions	Act 1 Nesting Cans	20 min	Mom showed her child how to stack up the cans then how to knock them down	The child laughed every time she got to knock the cans down	Yes	Mom was a little more into the activity than last week Mom was feeling better	Mom continued to do the stop and go activity
Building parental emotional awareness	My parenting past	15 min	Mom was a little stressed out today due to the child's being sick again, but she still completed the activity	The child played with the sensory box activity	Yes	Mom was stressed out about the child being sick	Mom continued playing with the child with nesting cans
Listening and interacting with toddler	Setting positive limits	20 min	Mom took the time to complete the activity Mom included the child while doing the activity by sitting the child on her lap	Child cuddled with mom scribble on the same papers mom was filling out	Yes	none	none
Developing self-regulation strategies over time	My child's tools	15 min	Mom was gracious doing the activity she completed the activity with no trouble	played with the stacking cups	Yes	none	Mom continued to do the parenting past activity whenever she had time
Listening and interacting with toddler	Emotional deposits/Praise and encouragement pennies	20 min	Mom completed the activity with the child Mom was interacting with the child during the activity time Mom was not as talkative as other times	Happy interacting with mom	Yes	Mom is going through a hard time right now dealing with depression	none

Building parental emotional awareness	Reactions to stress and defining stress	10 min	Mom completed the activity involving her child Mom gave the child a piece of paper and crayons	Child wanted to be by mom during the home visit	Yes	none	Mom continues to work with the praise and encouragement
Building parental emotional awareness	Exploring sources of stress	15 min	Mom was not as involved with the activity was not feeling well	Child was playing with baby dolls while mom completed stress activity	Yes	none	none
What my toddler tells me Listening and interacting with my toddler/understanding	Demonstration - Child Cue Cards	15 min	Mom was more involved with the activity this week Mom was very lovable towards her daughter both did the activity	Child was happy and involved with the activity	Yes	none	none
Identifying and labeling emotions	Sorting feeling cards		Mom completed the activity with her child showing her the happy card then the surprise upset card	The child was copying mom's faces	Yes	none	none
Understanding temperament	You and your world	20 min	Mom was slightly flustered by the questions she states she really never has time to think of the what "ifs"	N/A	Yes	It took mom awhile to think of answers I'm not sure if mom was completely honest since she doesn't take to much time to herself in order to answer the questions	none
Understanding temperament	My temperament Part 2	25 min	Mom was slightly reluctant she said she really takes time to analyze herself	N/A	Yes		none
Temperament	The way I think and learn	20 min	Mom took a closer look at herself as a person, not just a mom	N/A	Yes	Mom is getting better at thinking of herself	none
How does my baby feel in her world/home	Home run	20 min	Child enjoyed the activity and it made mom happy to see her child happy	Child had fun putting his hand in sensory box he giggled	Yes	Mom was very in tuned with the child's needs	none
How does my baby feel in her world/home	Home Hunt	20 min	Mom enjoyed the activity she did a great job in describing the items	Child did fine for a few minutes after that he was tired and didn't want to do the activity	Yes	Mom tried to keep the child engaged as long as possible	Mom has introduced more sensory play

How do I feel about stress	Sources of Stress	25 min	Mom was stressed over all the new changes now that school is starting so she had a hard time focusing	N/A	No	Mom has a lot on her plate at the moment	none
How do I feel about stress	How does stress affect your body	25 min	Mom was very responsive she took the information in and made comments	N/A	Yes	Mom did a good job analyzing her stress level and stressors	none
Steps to dealing with my Stress and feelings	Positive mental attitude	20 min	Mom tried the breathing activities she would close her eyes and take deep breaths	N/A	No	Mom tried to finish but it was hard when all the kids needed her attention	none
Steps to dealing with my Stress and feelings	not stated	25 min	Mom feels comfortable talking about her stress and feelings	N/A	No	Mom does what she can during the visit but it's hard when her kids want her attention after being in daycare or school all day	mom slept in one day over the weekend (managing stress)
Dealing with stress	Steps to a positive mental attitude	20 min	Mom said that the activity was hard to do because she can dream but realistically getting to what she wants is hard	N/A	Mom tried it	Mom is a realist and does well with what she has	none
Identifying stressful things in my life	How do I feel about stress part 2	15 min	Mom was very open talking about what causes stress in her life	N/A	Yes	Mom did very well and seem to enjoy the information	Mom states she was more aware of her stress
Steps to dealing with my Stress and feelings	Learn to relax	15 min	Mom had fun doing this she said it would have been better if there was a handsome masseuse to help her relax	N/A	Yes	Mom does great at taking advice and putting it to practice	Mom continues to work on her stress
How do I feel about stress	How stress effects your body	15 min	Mom was very interested in the material	N/A	Yes	Mom has lots of stress at this time. She deals with it very well for being so young	Mom continues to work on stress relief
Steps to dealing with my Stress and feelings	Part 5	25 min	Mom tried to accomplish the activity but she had a hard time with the child being there	N/A	No	Mom isn't as stressed after vacation seems to have claimed her a lot	none

Steps to dealing with my Stress and feelings	Positive mental attitude	25 min	Mom says she tries to look at this in a positive form.	N/A	Yes	Mom knows what causes most of her stress but unfortunately, there is nothing she can do about it	none
Steps to dealing with my Stress and feelings	Lavonda's bad day	15 min	Mom states that she can relate to Lavonda that there are days she feels the same	N/A	Yes	Mom deals well with what life throws her way	Mom has been focusing on the positive
Steps to managing stress	Part 8	25 min	Mom has positive answers to the questions I asked her. She says she can usually handle anything the only thing she struggles with is the financial issues	N/A	Yes	none	Mom has been having contractions and not feeling well so hasn't had time to follow through
Steps to managing stress	How well do I manage my stress	20 min	Mom was open to activity she opened up about her mom being pregnant and things that cause her stress	N/A	Yes	Mom is on bedrest for the rest of her pregnancy	Mom has been trying a stress ball
Getting close to my baby	Getting close to my baby	10 min	Activity left for mom to do after explanation	N/A	No	Mom did not complete handout	none
Baby and toddler cues	stop and go signals	15 min	Mom states that the activity seemed easy enough	N/A	No	Mom did not complete handout	none
Baby and toddler cues	Activity 2 stop and go	10 min	Mom only half listened she had other concerns	He cooperated	No	Did not do activity son had surgery	none
Baby and toddler cues	Child cue cards	10 min	Mom was receptive to ideas	He was not interested he was ready to take a nap	No	Did not do activity	none
Identifying stressful things in my life	How do I feel about stress part 1	15 min	Mom was very interested in the activity. She found it very informative She states she has been very hormonal since her pregnancy	N/A	Yes	One of the questions talked about the parent looking at a picture	none
Understanding what my baby is telling me	Getting close to my baby Common strategies	10 min	Mom says she already does these activities with her child	N/A	No	Mom and child have a close relationship	none
Toddler and	stop and go	10	Mom said it was fun	N/A	No	Mom already picks up on a lot	mom states she did some exercises

baby cues	signals	min				of her child's cues	with baby Getting close to baby
Baby and Toddler cues	Activity 1 stop and go	10 min	Mom states she sees her son doing some of the cues	Child did some cues for mom	No	none	none
Discover my own temperament	The way I think and learn	20 min	Mom was amazed to find out what was her temperament	Child was playing around with mom	Yes	Mom was happy to discover a little more about her temperament Mom asks questions and discussed main points. Mom is understanding her temperament better	none
Identifying my baby's temperament	How does my baby feel in her world	20 min	Mom understood that her temperament is not better that the other one	Child played around mom with toys	Yes		none
Identifying my baby's temperament	Boasting fit between you and your child	20 min	Mom was very receptive to learning her child's temperament. Mom filled the activity boasting fit and mom understood her child's temperament style	the child played with a puzzle while mom helped him fit the pieces in	Yes	Mom was receptive and understanding	none
Learning ways to increase the fit between my temperament and my baby's temperament	My child's feelings at mealtime	30 min	Mom understood what a child her sons age is eager to do. Mom read the information and asked questions	Child played with toys around the mom	Yes	Mom was attentive to the information	None
Identifying stressful things in my life	How do I feel about stress	30 min	Mom understood the word stress talked about it. Mom knew what causes stressful events Mom understood that it is important to identify the source of stress	Child was scribbling on paper while mom discussed activity	Yes	Mom did really good she liked the topic	none
Identifying stressful things in my life	How stress effects your body	20 min	Mom pointed out all the symptoms that she experienced when stressed	Child played with blocks next to mom	Yes	Mom was very interested in the topic	none
Steps to managing stress	Lavonda's bad day	30 min	Mom talked about some events that can cause	Child played with blocks nest	Yes	Mom had a difficult time being on task. I took more time that	none

Goal	Activity	Time	Mother's Response	Child's Response	Accurate completion	HV Comments	F/U of Previous Activity
			stress. Mom understood the types of stress. Mom discussed the steps of how to manage stress.	to mom		what I planned	
Steps to managing stress	How well do I manage my stress	30 min	Mom was only engaged when doing the activity. Mom was very busy at the moment	the child played with toys	Yes	Mom is having a busy time in her life and at the moment she stated that she cannot continue doing the BEES	none
Develop self-awareness	My Temperament Part 1	5 min	Mom took time to think about how she would react to stressful situations	the child got frustrated wanting mom's attention	Yes	Mom was uncomfortable at the beginning doing the activity but then she does better at it and completed the activity	Mom worked with child on copycat activity during the week
Recognizing child temperament	My child's Temperament	20 min	Mom was very into the activity Mom liked the handout because it confirms what types of temperaments each of her kids have.	Child was cooperative mom encouraged child to be involved	Yes	Mom enjoyed the activity	Mom continues to work on finding out what kind of temperament she has
Building parental emotional awareness	Home Hunt	35 min	Mom enjoyed the activity going around the house and watching her child's reaction	Child enjoyed the activity especially around the Kitchen area	Yes	Mom and child did a wonderful job completing the activity and staying on task	Mom finished the activity on types of temperament
Identifying my toddler's different strengths	Deposits to your child's feeling bank	30 min	Mom was very into the activity encouraging and praising child's efforts	Child was engaged on the activity, smiling and interacting with parent	Yes	Mom continues to be engaged with the child during the visit	Mom continued to play Home hunt with the child throughout the week
Listening and interacting with my toddler	Singing together/songs & finger play/baby's favorite songs	35 min	Mom was active during the home visit while doing the activity. Mom sang songs with her child in Spanish and showed him Spanish finger play	Child was happy, smiling, and interacting with mom	Yes	Mom did a good job using short clear words while signing and talking to the child	Mom continued doing the deposit your child's feelings bank
Understanding how stress can affect my toddler	Helping your child manage stress act 1/ signs of stress/tips for relieving stress	35 min	Mom was involved praising and encouraging the child	Smiling laughing with mom while doing the activity	Yes	Mom and child seem to have a good healthy relationship	Continue to play with the signing activity

Identifying and labeling	Feeling Books: Baby Faces	40 min	involved - encouraged child	Active making faces with mom	Yes	Mom and child did a good job during the visit	Continuing to help mom with stress activity?
Building parental emotional awareness	Parenthood myths Act 1/paring myths true and false	30 min	Mom was active and engaged with the activity's handouts and responses	Child was engaged during the activity time with mom	Yes	Mom is very good at completing the activities involved with the activities	Mom continues to use the feelings book throughout the week with the child
Building parental emotional awareness	Other parenting/media parents	30 min	Mom talked about what she admires as a parent on TV and in real life	Child scribbling with the crayons and pens	Yes	Mom attentive and involved with her child and the activity	Mom continued to do the activity parenthood myths
Listening and interacting with toddler	stop and go signals	30 min	Mom was involved with her child during the home visit while doing the activity	Child was involved with mom during the home visit's activity time	Yes	Mom continues to be very involved with her child	Continue playing and doing the other parent activity
Listening and interacting with toddler	what my baby is telling me	30 min	mom was attentive and cooperated with the activity. Tried to focus on the signals that the child was telling her but mom was not feeling well	Child was walking around playing with mom Y	Yes	Mom was not feeling well but she made an effort to complete the activity	Mom continued to work with the stop and go activity but not everyday
Identifying and labeling emotions	Act 1 Nesting Cans	20 min	Mom showed her child how to stack up the cans then how to knock them down	The child laughed every time she got to knock the cans down	Yes	Mom was a little more into the activity than last week Mom was feeling better	Mom continued to do the stop and go activity
Building parental emotional awareness	My parenting past	15 min	Mom was a little stressed out today due to the child's being sick again, but she still completed the activity	The child played with the sensory box activity	Yes	Mom was stressed out about the child being sick	Mom continued playing with the child with nesting cans
Listening and interacting with toddler	Setting positive limits	20 min	Mom took the time to complete the activity Mom included the child while doing the activity by sitting the child on her lap	Child cuddled with mom scribble on the same papers mom was filling out	Yes	none	none
Developing self -regulation strategies over time	My child's tools	15 min	Mom was gracious doing the activity she completed the activity with no trouble	played with the stacking cups	Yes	none	Mom continued to do the parenting past activity whenever she had time
Listening and interacting with	Emotional deposits/Praise	20 min	Mom completed the activity with the child	Happy interacting with	Yes	Mom is going through a hard time right now dealing with	none

toddler	and encouragement pennies		Mom was interacting with the child during the activity time Mom was not as talkative as other times	mom		depression	
Building parental emotional awareness	Reactions to stress and defining stress	10 min	Mom completed the activity involving her child Mom gave the child a piece of paper and crayons	Child wanted to be by mom during the home visit	Yes	none	Mom continues to work with the praise and encouragement
Building parental emotional awareness	Exploring sources of stress	15 min	Mom was not as involved with the activity was not feeling well	Child was playing with baby dolls while mom completed stress activity	Yes	none	none
What my toddler tells me Listening and interacting with my toddler/understanding	Demonstration - Child Cue Cards	15 min	Mom was more involved with the activity this week Mom was very lovable towards her daughter both did the activity	Child was happy and involved with the activity	Yes	none	none
Identifying and labeling emotions	Sorting feeling cards		Mom completed the activity with her child showing her the happy card then the surprise upset card	The child was copying mom's faces	Yes	none	none
Understanding temperament	You and your world	20 min	Mom was slightly flustered by the questions she states she really never has time to think of the what "ifs"	N/A	Yes	It took mom awhile to think of answers I'm not sure if mom was completely honest since she doesn't take to much time to herself in order to answer the questions	none
Understanding temperament	My temperament Part 2	25 min	Mom was slightly reluctant she said she really takes time to analyze herself	N/A	Yes		none
Temperament	The way I think and learn	20 min	Mom took a closer look at herself as a person, not just a mom	N/A	Yes	Mom is getting better at thinking of herself	none
How does my baby feel in her world/home	Home run	20 min	Child enjoyed the activity and it made mom happy to see her child happy	Child had fun putting his hand in sensory box he giggled	Yes	Mom was very in tuned with the child's needs	none
How does my	Home Hunt	20	Mom enjoyed the	Child did fine for	Yes	Mom tried to keep the child	Mom has introduced more sensory

baby feel in her world/home		min	activity she did a great job in describing the items	a few minutes after that he was tired and didn't want to do the activity		engaged as long as possible	play
How do I feel about stress	Sources of Stress	25 min	Mom was stressed over all the new changes now that school is starting so she had a hard time focusing	N/A	No	Mom has a lot on her plate at the moment	none
How do I feel about stress	How does stress affect your body	25 min	Mom was very responsive she took the information in and made comments	N/A	Yes	Mom did a good job analyzing her stress level and stressors	none
Steps to dealing with my Stress and feelings	Positive mental attitude	20 min	Mom tried the breathing activities she would close her eyes and take deep breaths	N/A	No	Mom tried to finish but it was hard when all the kids needed her attention	none
Steps to dealing with my Stress and feelings	not stated	25 min	Mom feels comfortable talking about her stress and feelings	N/A	No	Mom does what she can during the visit but it's hard when her kids want her attention after being in daycare or school all day	mom slept in one day over the weekend (managing stress)
Dealing with stress	Steps to a positive mental attitude	20 min	Mom said that the activity was hard to do because she can dream but realistically getting to what she wants is hard	N/A	Mom tried it	Mom is a realist and does well with what she has	none
Identifying stressful things in my life	How do I feel about stress part 2	15 min	Mom was very open talking about what causes stress in her life	N/A	Yes	Mom did very well and seem to enjoy the information	Mom states she was more aware of her stress
Steps to dealing with my Stress and feelings	Learn to relax	15 min	Mom had fun doing this she said it would have been better if there was a handsome masseuse to help her relax	N/A	Yes	Mom does great at taking advice and putting it to practice	Mom continues to work on her stress
How do I feel about stress	How stress affects your body	15 min	Mom was very interested in the material	N/A	Yes	Mom has lots of stress at this time. She deals with it very well for being so young	Mom continues to work on stress relief

Steps to dealing with my Stress and feelings	Part 5	25 min	Mom tried to accomplish the activity but she had a hard time with the child being there	N/A	No	Mom isn't as stressed after vacation seems to have claimed her a lot	none
Steps to dealing with my Stress and feelings	Positive mental attitude	25 min	Mom says she tries to look at this in a positive form.	N/A	Yes	Mom knows what causes most of her stress but unfortunately, there is nothing she can do about it	none
Steps to dealing with my Stress and feelings	Lavonda's bad day	15 min	Mom states that she can relate to Lavonda that there are days she feels the same	N/A	Yes	Mom deals well with what life throws her way	Mom has been focusing on the positive
Steps to managing stress	Part 8	25 min	Mom has positive answers to the questions I asked her. She says she can usually handle anything the only thing she struggles with is the financial issues	N/A	Yes	none	Mom has been having contractions and not feeling well so hasn't had time to follow through
Steps to managing stress	How well do I manage my stress	20 min	Mom was open to activity she opened up about her mom being pregnant and things that cause her stress	N/A	Yes	Mom is on bedrest for the rest of her pregnancy	Mom has been trying a stress ball
Getting close to my baby	Getting close to my baby	10 min	Activity left for mom to do after explanation	N/A	No	Mom did not complete handout	none
Baby and toddler cues	stop and go signals	15 min	Mom states that the activity seemed easy enough	N/A	No	Mom did not complete handout	none
Baby and toddler cues	Activity 2 stop and go	10 min	Mom only half listened she had other concerns	He cooperated	No	Did not do activity son had surgery	none
Baby and toddler cues	Child cue cards	10 min	Mom was receptive to ideas	He was not interested he was ready to take a nap	No	Did not do activity	none
Identifying stressful things in my life	How do I feel about stress part 1	15 min	Mom was very interested in the activity. She found it very informative She states she has been very hormonal since her pregnancy	N/A	Yes	One of the questions talked about the parent looking at a picture	none

Understanding what my baby is telling me	Getting close to my baby Common strategies	10 min	Mom says she already does these activities with her child	N/A	No	Mom and child have a close relationship	none
Toddler and baby cues	stop and go signals	10 min	Mom said it was fun	N/A	No	Mom already picks up on a lot of her child's cues	mom states she did some exercises with baby Getting close to baby
Baby and Toddler cues	Activity 1 stop and go	10 min	Mom states she sees her son doing some of the cues	Child did some cues for mom	No	none	none
Discover my own temperament	The way I think and learn	20 min	Mom was amazed to find out what was her temperament	Child was playing around with mom	Yes	Mom was happy to discover a little more about her temperament	none
Identifying my baby's temperament	How des my baby feel in her world	20 min	Mom understood that her temperament is not better that the other one	Child played around mom with toys	Yes	Mom asks questions and discussed main points. Mom is understanding her temperament better	none
Identifying my baby's temperament	Boasting fit between you and your child	20 min	Mom was very receptive to learning her child's temperament. Mom filled the activity boasting fit and mom understood her child's temperament style	the child played with a puzzle while mom helped him fit the pieces in	Yes	Mom was receptive and understanding	none
Learning ways to increase the fit between my temperament and my baby's temperament	My child's feelings at mealtime	30 min	Mom understood what a child her sons age is eager to do. Mom read the information and asked questions	Child played with toys around the mom	Yes	Mom was attentive to the information	None
Identifying stressful things in my life	How do I feel about stress	30 min	Mom understood the word stress talked about it. Mom knew what causes stressful events Mom understood that it is important to identify the source of stress	Child was scribbling on paper while mom discussed activity	Yes	Mom did really good she liked the topic	none
Identifying	How stress	20	Mom pointed out all the	Child played	Yes	Mom was very interested in the	none

stressful things in my life	affects your body	min	symptoms that she experienced when stressed	with blocks next to mom		topic	
Steps to managing stress	Lavonda's bad day	30 min	Mom talked about some events that can cause stress. Mom understood the types of stress.	Child played with blocks nest to mom	Yes	Mom had a difficult time being on task. I took more time that what I planned	none
Steps to managing stress	How well do I manage my stress	30 min	Mom discussed the steps of how to manage stress. Mom was only engaged when doing the activity. Mom was very busy at the moment	the child played with toys	Yes	Mom is having a busy time in her life and at the moment she stated that she cannot continue doing the BEES	none

Although, the mothers did not complete the activity assignments during the week the EHS home visitor did not complete them during the visit but went on as instructed to the next lesson.

Some of the mothers consistently reported how they implemented the M-BEES lessons with their children during the week but did not complete the activity handout. A review of the implementation log revealed that although the mothers did not complete the activity, they applied what they learned throughout the week with the child at a rate of 54%.

Conclusion

The adaptation M-BEES Questionnaires and focus group indicated that further adaption was not required. However, an indication of difficulty regarding the formal Mexican dialect of Spanish was reported by the EHS home visitors. Time constraints were an issue concerning the M-BEES implementation due to the EHS program home visit expectations. Time constraints were also an identified obstacle by the mothers due to cultural role expectations and the. The mothers' did not complete the activities related to the lessons due to cultural expectations that the mother focus on the family rather than self. The information gain through the current study provides rich indications for further adaptation of the M-BEES for cultural sensitivity which will be discussed in Chapter 5.

Chapter 5 concludes the Data Analysis Spiral Model (Creswell, 2013) with the inclusion of step three regarding interpretation and step four representation and visualization of the data interpretation. The substantive findings in chapter 4 are discussed as to the implications for further adaptation and congruent implementation strategies.

CHAPTER 5

Discussion

The discussion includes an interpretation of the research data results related to the M-BEES adaptation and implementation. The discussion is organized by research question and the purpose of adaptation and implementation. The findings include language, time constraints, and activity. Adaptation and implementation are presented separately in relation to the research questions. After the discussion, an integration of adaptation and implementation is presented as each has implications for the other. The Bioecological Model (Brunfenbrenner & Morris, 2006) is included in the discussion. Limitations of the study are pursued. The discussion concludes with implications for practice, policy, and research.

Adaptation

The research outcomes for question 1 identified specific areas for further adaptation. The adaptations required are in the areas of language, lessons/activities, and time constraints. Time constraints in the adaptation findings refer to the mother's limited time to spend on self-reflection lessons/activities.

Language

The M-BEES written activities were translated to meet research standards but not to represent the 62 regional dialects and slang of Mexico (Burton, 2008; Schmal, n.d.). It is not reasonable that all dialects and slang represented in the many regions of Mexico be available in the written Spanish translation of the M-BEES activities. However, ongoing and flexible translation represents an acceptable method of increasing understanding (Agrazzi et al. 2010; Domenech-Rodriguez et al., 2011). A description of how this can be included in the M-BEES activities will be addressed under implementation: language.

Similar encounters regarding Spanish translation, interpretation, and understanding have been reported in three curriculum adaptation studies by Agrazzi et al., Domenech-Rodriquez et al. (2011), and Dumas et al. (2011). In each of the adaptation studies, there was a necessity to continuously meet the demands Spanish dialects and slang for improved understanding. Communication due to various dialects and slang regarding Spanish are not uncommon in the United States. Shi and Canizales (2013) found that different Spanish dialects spoken by migrants living in the United States were significant enough to affect communication in health care delivery even when the provider spoke Spanish. In the current study, the mothers' spoke and read English and when necessary they chose the English version of the lesson.

Lesson/Activity

Culturally the family is a priority and the recommendation is to utilize this strength in adapting the lessons for the inclusion of familismo in the activity. Familismo is not limited to primary family members but also includes secondary family and selected friends (Smith-Morris et al., 2012). Older siblings also assist with caregiving. Therefore, an indication for adaptation includes the cultural context of the Mexican American family. Based on this the M-BEES lessons, even those teaching social-emotional parenting strategies for the child require adaptations that include those members identified to be part of the family. Included in the context of familismo is respeto (respect), simpatico (harmony), and personalismo (relationship).

Autonomy is considered to denote disrespect, interrupt family simpatico, and consequently interrupt personalismo (Calzada, Fernandez, & Cortes, 2010). The literature indicates that family values in the Mexican-American family focus on the family as a collective rather than individual family members (Calzada, 2010; Smith-Morris et al., 2012; Vargas & Kemmelmeier, 2013). Autonomy is also a disruption to the mother's role in the family. Nuñez et

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al. (2016) point out that the maternal role is considered the main source of strength that includes taking responsibility for the family's wellbeing. Strong Mexican cultural values of family, harmony, respect, and interpersonal relationships are predictive of a positive emotional environment (Sotomayor-Peterson et al. 2012).

Although it is not the intention of the M-BEES to change the culture, the importance of autonomy in practicing self-reflection cannot be left out of the M-BEES curriculum due to the impact parent self-awareness has on parenting practices. These activities require self-reflection regarding the parent's experiences and how they impact their parenting practices and consequently the child. Snyder et al. (2012) found that self-reflective mindfulness practices by the parent have positive effects on attachment and child development. Toddlers with insecure attachments have been found to demonstrate poor social emotional development in the areas of self-regulation regarding increased externalizing behavior and general negativity at 2, 5, 10, and 12 years (Boldt et al. 2017). Academic success is influenced by the ability of the child to achieve social emotional competencies such as self-regulation (Liew, 2012).

Time Constraints

Another area regarding adaptation was taking time away from the child so the mother could focus on self. This also included siblings and her household duties such as preparing supper. Adaptation of activities regarding creative methods of including the child and siblings during self-reflection could incorporate a simple craft or activity related to the material. The implementation section will discuss implementation strategies that maintain the integrity of the lesson/activity while supporting cultural expectations of familismo. These methods incorporate respect and family in the application and learning of the curriculum making acceptance likely (Sanders & Kirby, 2012).

Implementation

Question 2 feasibility of implementation was found to demonstrate an acceptance of implementation regarding the M-BEES. Implementation was not without challenges. These challenges concern the codes of language, time constraints, and lesson/activity.

Language

The M-BEES transcription into the formal Mexican dialect of Spanish did not meet the needs for adaptation concerning language. It is recommendation is that home visitors identify, record, and report encounters of words that present difficulty for the participants in understanding the Spanish transcribed activities. This provides discovery of words that require dialect and slang adjustments. Creating a list for interpretive meanings of concepts and phrases for various Mexican dialects of Spanish and using the list during the curriculum implementation as a reference is a practical application of fluid translation (Agrazzi et al., 2010). The home visitors would require training in the flexible application regarding the immediate adjustment of words using the list to meet the needs of those who have specific interpretation for dialect, slang, and word meaning. The home visitors would also require training to add to the list by including unfamiliar words that the participants had problems understanding or that had a different slang or dialect meaning or word.

Time Constraints

In programs that address cultural needs of families, utilizing an interventionist from the culture is more conducive to acceptance of the lessons. However, these interventionists usually adhere to the same cultural values making it difficult for them to understand concepts that are not part of the culture. The Mexican culture does not practice individualism (Vargas & Kemmelmeier, 2013) such as self-awareness of temperament or stress.

The instructions for the curriculum implementation took time for the home visitor to comprehend and apply correctly. Simplifying the instructions with simple steps and bullet points would save time and increase comprehension. In reviewing the lessons for implementation, the home visitors spent more time than usual attempting to understanding exemplars related to the concept of self-awareness. Schaefer (2016) reported that self-awareness in home visitors is a personal strength that adds to the depth of home visitation outcomes. Schaeffer adds that including self-awareness among other personal learnings is important when training home visitors. This finding indicates that training should include a definition and application of self-awareness as a concept with the exemplars of personal temperament, reactions to stress, and past parenting experiences.

Training the home visitor to practice self-awareness provides an understanding of the concepts which decreases the time for lesson preparation. During the training exercises in assisting the home visitor to practice self-awareness and explore how some of the self-awareness is manifested in their lives would provide a personal understanding to improve implementation. Heaman, Chalmers, Woodgate, and Brown (2006) found that home visitors require the knowledge and skills to address the needs of parents. An approach that provides firsthand knowledge of an intervention also increases empathy, a strength found in effective home visitors (Schaefer, 2016). To accomplish an understanding of personal self-awareness the home visitors would be expected to complete a portion of the BEES lessons on self-awareness activities. Incorporating self-reflection into the training would encompass a third of the training due to the level of self-reflection included in the lessons. Increased time in training would over the long haul save time in implementation and increase characteristics that are considered strengths in home visitors.

Lesson/Activity

The results point toward adapting the method in which the implementation of the M-BEES is delivered. Prior a discussion of adaptation of the activity explained an incorporation of family into the structure of the lesson in general and specifically the activity. Calzada (2010) found that the inclusion of family members was a primary factor in the success of interventions with the Mexican culture. Inclusion of the family into the process would begin with choosing a parenting goal. The mother is encouraged to share goal choices and have an open discussion with the family regarding goal decisions. Sotomayor-Peterson et al. (2012) report that cultural values of familismo and simpatico predict co-parenting and a positive emotional family environment. Although the lessons begin with the building parental awareness there are goal choices within this theme. The choices include application of various lessons that influence parenting such as temperament, stress, and past relationships and experiences. The home visitor then implements the lesson with the mother based on the goal choice. The activity related to the lesson is then shared with the family. For instance, with the goal choice of understanding temperament the lesson includes an activity in which the parent does various exercises that identify their temperament. The activity is completed during the week prior to the next home visit. During this time temperament can be a discussion with the family with encouragement for each member to identify their own temperament. The inclusion of the family in the goal decision demonstrates respeto. Respeto plays a dominant role in the Mexican American family and includes involving family in decision making (Calzada et al., 2010). Family involvement in the lesson encourages personalismo and simpatico as family members learn about themselves and others. Including family into the lessons supports familismo but also moves the family toward recognizing individual differences which promotes autonomy. Lessons could focus on choices with an

emphasis on parent respect for the child's choices as well as the child's respect for the parent's guidance. Activity development that includes interaction between family members and friends with the inclusion of a shared meal promotes simpatico and personalismo. Group activities that are shared with M-BEES participants in set encounters encourages personalismo.

Adaptation and Implementation

The intention of adaptation and implementation of the M-BEES is to maintain the fidelity of the curriculum (Smith et al., 2011) while incorporating Mexican cultural values. In adapting curriculum for cultural relevancy, a risk exists to the integrity of the original curriculum (Chaffin et al., 2004). However, the need to promote cultural adaptation for implementation to the Mexican American family is relevant while continuing to produce positive results intended by the original curriculum (Parra-Cordona et al., 2012). Castro, Barrera, Martínez (2004) note that the adaptation of curriculum does not meet cultural reliability in application, is not evidenced based nor is the adaptation effective if the curriculum is only adapted on the surface. An example of this is adaptation that only includes changing the language from English to Spanish.

Adaptation and implementation of the M-BEEs as the current study results indicate does not recommend changing curriculum goals, concepts, exemplars, and expected outcomes. The intention of changes to the M-BEES is the incorporation of cultural values regarding familismo, respeto, simpatico, and personalismo to the implementation of the M-BEES and not to changes in the lesson content. Adaptation and implementation point toward the need for fluidity in Mexican Spanish translation of the M-BEES, management of time constraints through the reduction of time spent in home visitor preparation, and adaptation of implementation techniques to include cultural values of familismo.

Research Fatigue

Evidenced based practice would not be possible without individuals who develop, implement, and participate in research programs. Individuals who implement research in social programs are often inundated by research that is intended to provide evidence that the programs are producing positive results and to explore the need for adaptation of program delivery. Clark (2008) describes the issue of individuals who are involved in repeated research attempts as research fatigue. Often the claim of being over-researched includes reasons not to engage in further research (Clark). Individuals that provide services in early childhood programs have expectations beyond service delivery that include paperwork, training, and mandated reports. Research adds to these already full workloads. However, the importance of scholarly activity in bringing evidence that produces positive outcomes is critical to providing services. Including program staff in research is many times critical to maintaining the program. Although research cannot be avoided in these situations increased support and empathy can encourage participation.

Theoretical Framework: Bioecological Model

An adaptation of the M-BEES was indicated related to proximal processes. For a bioecological transition of parenting skills to be impacted the proximal processes of language, time constraints, and activity assignments must be addressed. It is important to point out that these proximal processes occurred in the current study during the home visit between the EHS home visitor and the mother. The child is impacted by the mother's ability to experience a bioecological transition through the incorporation of the M-BEES lessons in the application of parenting during a proximal process with the child. Bronfenbrenner and Morris (2006) placed proximal processes as the catalyst in affecting child development. Personal relationships (EHS home visitor and mother-child dyad), context (EHS home visit and the application of the M-

BEES), and time constraints (preparation, implementation and completion of the M-BEES lesson and activity assignment) define the critical elements of proximal processes.

Study Implications

The current study provides information regarding the feasibility of conducting a larger study in piloting the M-BEES with the adaptations described in the discussion. As the adaptation and implementation of the M-BEES progresses with the inclusion of further research there are implications for practice, policy, and of course further research. Based on this a presentation concerning research intent followed by practice and policy potential is presented.

Research

The literature regarding parenting curricula with an attempt at adaptation for cultural relevance resulted in 5 curricula (Agrazzi et al., 2010; Axford, Lehtonen, Kaoukji, Tobin, & Vashti, 2012; Domenech-Rodriguez et al., 2011; Dumas et al. 2011; Lakes et al. 2011). Of these curricula only three provided information regarding the methods of attempted adaptation (Agrazzi et al.; Domenech-Rodriguez et al. 2011; Dumas et al., 2011). All five curricula were not specific to parenting skills that supported early childhood social-emotional development and parent self-reflection, nor did they target families during pregnancy and/or with infants and toddlers from birth to 36 months. The BEES curriculum provides a parenting curriculum specific to pregnant and parenting families with infants and toddlers prenatally to 36 months. The BEES represent lessons that focus on the importance of self-reflection on positive parenting outcomes with a specificity to infant and toddler social-emotional development. Further research is needed to test recommended adaptation and implementation of the M-BEES for validity with the Mexican American family. Research questions unanswered by the current study yet with implications for cultural curriculum adaptation and implementation are:

- How is culturally sensitive curriculum adaptation affected by an interventionist from the same culture?

- What is required to train home visitors from the same culture in the application and adaptation of culturally sensitive curriculum?

- Can culturally sensitive adaptation of curriculum maintain original curriculum fidelity?

It is important that the suggested adaptation includes an extensive study of the common dialectical Mexican-Spanish words and phrases. The results of this could be included in a glossary of the curriculum manual. A larger sample is required that includes a mixed methods approach. A larger sample would increase power to quantitative approaches and reliability to qualitative approaches. To truly test the M-BEES it is recommended that the M-BEES is the only curriculum applied with the participants or a more careful integration with an existing curriculum if compatible. Participant exclusion would exclude participants enrolled in another program that provides curriculum in the home. An incentive provided to the participants may decrease study dropout. Another suggestion is to employ home visitors for the sole purpose of implementing the M-BEES in the home. When home visitors are from the Mexican culture it is important to extend the training to assist them in understanding concepts and to tailor the training to their cultural values.

Practice

Nursing practice has a concern for health including developmental outcomes of all populations despite culture or background. Nursing has an understanding based on research evidence that from preconception on the health of individuals are affected by choices concerning lifestyles and the environment. Social-emotional development affects both physiological and

psychological health. A strong platform for social-emotional development begins in early childhood.

Early social-emotional development is influenced by parenting choices. The parenting choice begins with the decision and planning for a baby that is wanted. The decision to conceive leads toward a bonding with the unborn infant setting the stage for parenting that promotes early social-emotional development. Once the infant is born the parents can support early social emotional development through the relationship and interaction with the infant/toddler. Through self-reflection the parent can understand how their socialization to emotion impacts their infant/toddler. The BEES curriculum provides early child parenting education that guides the parent toward the above described process. The current study adapts and implements the M-BEES for cultural sensitivity regarding the Mexican American family with children from 0 to 36 months. Among health care professionals, nurses have been rated the highest (Gallop Poll, 2016) in trust and ethical standards by the American people every year but 1 since 1999 (Norman, 2016). In 2001 after 9/11 nurses were rated as second and fire fighters first. The high rating by the American people places nurses in an opportune spot to influence public standards. Americans desire leaders such as nurses that can be trusted (American Nurses Association, n.d.). Nurses have been charges with leading change for positive health outcomes. Nurses have the potential to effect practice through building on current interventions for cultural inclusion, such as the BEES and effecting policy for inclusion of the M-BEES as an early childhood standardized curriculum.

Policy

Policy has the potential to improve population, community, family, and individual health outcomes (Centers for Disease Control and Prevention; CDC, 2012). Policy has broad

implementation that include laws, regulations, procedures, administrative action, incentive, or

voluntary practice of governments and institutions (CDC). In this proposal of a policy

development process regarding the M-BEES the community level is the target for policy

development. The first step in identifying the need for policy is obtaining evidence that a

problem that affects population health exists. Research results have the capacity to provide

evidence of gaps in the delivery of services. Identifying problems that influence population

health is the first step in the CDC process of policy development. The current research identifies

the problem, a gap in the availability of culturally relevant early social-emotional development

curricula that serves the Mexican migrant family. Mexican migrant families have the potential

for poor social-emotion development outcomes based on high risk factors (Orozco et al., 2013;

Shonkoff et al., 2012). The next step in the development of policy is to analyze policy options,

costs, and how policy impacts health (CDC). This policy development step has the potential to

promote the M-BEES as a possible standardized curriculum for Mexican migrant families.

Looking ahead the beginning of the analysis of policy options and costs concerning the

M-BEES curriculum requires stakeholders with concerns in early child development. Starting

this process begins with the preparation of an evidenced based white paper concerning the

problem (lack of standardized culturally sensitive early social-emotional development

curriculum applied with Mexican American families) and the M-BEES future research (pilot and

validity) findings sent to identified stakeholders including government officials, community

members from the Mexican American population, early child care providers and administrators.

Through this endeavor a committee is formed to analyze options, costs, benefits, and resources.

The committee would be charged with next steps of policy development, enactment, and

implementation.

Limitation of the Study

Sample size limited the study results. The barriers related to sample size was the lack of Mexican migrants enrolled in the EHS program, political statements regarding deportation of migrants (Estevez, 2015), and the coinciding application of two curriculums (PAT and M-BEES) during the home visit. Although the Midwest has a growing number of Mexican migrant families, this Early Head Start had a disproportionally small number enrolled in their program. The investigator was unable to offer an incentive to participate in the study. The EHS home visitors were fatigued from a previous study and were concerned about beginning a new study which may have influenced participation by the mothers. Also, due to this issue, the investigator was unable to gain an important level of trust with the EHS home visitors (Creswell, 2013).

Conclusion

The study provided substantive results that include vital information for necessary inclusion in early social-emotional curriculum applied with the Mexican migrant families. Feasibility studies are valuable precursors to larger research. Providing information regarding the feasibility before conducting a full program of research saves money and time. A synthesis of these results was provided with a determination of areas required for adaptation. The lessons learned were; (a) a fluidity of translation that includes a glossary of regional dialects of Mexico, (b) incorporating cultural beliefs into the curriculum that includes extended and primary family (familismo, respect), (c) providing socialization with other families receiving the curriculum (simpatico, personalism), and (d) moving an autonomous approach of self-awareness into a collective view that includes the family. These findings are congruent with the literature concerning cultural applications of family and interpersonal relationships. The area of self-

reflection related to autonomous concepts such as temperament, stress, past experiences of childhood was not found in the literature.

A suggestion to incorporate self-reflection and personal understanding as a family activity provides inclusivity of the cultural belief of familismo and respeto. This is a new method of promoting self while maintaining cultural values. The M-BEES curriculum does require further adaptation for cultural sensitivity but the content of the lessons was rich in concepts and exemplars that provide a catalyst to improve early social-emotional parenting skills and consequently social-emotional development. It is this researcher's hope that adaptation of the M-BEES will proceed and include further research.

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Appendix A
Building Early Emotional Skills Curriculum (Brophy-Herb et al, 2007)

Theoretical Framework: Infant Mental Health Model: Nurturing and secure parent-infant/toddler relationships provide a context for optimal development.	
Target Population: Pregnant women and parent-infant/toddlers from birth to 36 months	
Implementation Modality: Home Visitation	

Implementation Instructions:
Choosing Activities:

The four curriculum codes are organized in sequential order as they build on one another.

- Due to the importance of self-awareness in interacting with the baby in an optimal manner, the Building Parental Awareness code is an implementation starting point.
- Flexibility in the choice of lesson follows the lead of the parent and the home visitor's knowledge of the parent's needs.
- Parents choose a parenting goal from a list of parent goals correlated with the curriculum code, the lesson is then chosen based on the parent's choice of parenting goal. For example:
  - The parent chooses the parent goal understanding temperament* The lesson will begin with the correlating lessons to be delivered during home visits:
    - My Temperament, part 1
      - You and Your World
    - My Temperament, part 2
      - The Way I Think and Learn
- Parent workbook: A folder may be used by the parent to file handouts and materials to be used to tract progress and refresh learning.
  - These workbooks are meant as a reference and the parent is encouraged to decorate them and even add pictures.

Lessons/Activities and parent goals chosen by the participants in the current study are highlighted in blue.

Curriculum Code	Lesson/Activity	Parent Goals
Building Parental Awareness **Goal:** Develop self-awareness about one's own emotions and ways of handling emotions as a foundation for sensitive parenting. Self-awareness of one's own emotions and regulation strategies is needed before these skills can	Baby Kicks and Wiggles Imagining My Baby	Getting to know my baby (prenatal)
	Parenthood Myths Other Parents	• Thinking about being a parent (prenatal)
	My Temperament, part 1 • You and your world My Temperament, part 2 • The way I think and learn My Child's Temperament	• Understanding temperament* • Discovering my own temperament style

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be fostered, over time, in infants and toddlers.	How Does My Baby Feel in her/his World Boosting Fit Between You and Baby My Feelings at Mealtime My Child's Feelings at Mealtime	• Identifying my baby's temperament style • Learning ways to increase the fit between my temperament and my baby's temperament

	Getting Close to Baby
	  • Discussion – Getting Close to Your Baby
	  • Strong Roots
		• Building a Close Relationship with My Baby

	How Do I Feel about Stress, part 1
	  • Reactions to stress and defining stress.
	How Do I Feel about Stress, part 2
	  • Exploring Sources of Stress
	How Do I Feel about Stress, part 3
	  • Signs of stress
	  • How does stress effect your body?
		• Identifying stressful things in my life

	Steps to Dealing with My Stress and Feelings, Learning to Relax, Part 4
	  • How stress effects my body.
	Steps to Dealing with My Stress and Feelings: Learning to Relax, Part 5
	  • Creating a peaceful place
	Steps to Dealing with My Stress and Feelings, Part 6
	  • Positive mental attitude
	Steps to Dealing with My Stress and Feelings, Part 7
	  • Lavonda's bad day
		Dealing with stressful things in my life

	Steps to Managing My Stress, part 8 • Identifying stress management skills Steps to Managing My Stress, part 9 • How well do I manage stress?	
	Helping My Child Manage Stress	• Understanding how stress can affect my baby or toddler
	Family Movies Parenting Pasts What My Child Will Remember Family Rules	Exploring how my past relationships and experiences might impact how I parent
Listening to and Interacting with Baby/Toddler **Goal:** Engage in sensitive, responsive interactions and exchanges with infants and toddlers.	Baby and Child Cues • Stop & Go Signals • Demonstration – Child Cue Cards	• Understanding what my baby is telling me
	Baby-Child Massage	• Using baby and toddler massage
	Copy Cat	• Showing my baby positive ways to express feelings
	Copy Cat! Be A Cool Cat!	• Showing my baby positive ways to express feelings
	Playing with My Baby	• Playing with my baby
	My baby's signals at mealtime	• Understanding what my baby is telling me • Making mealtimes important learning opportunities
	Using Thinking and Feeling Words	• Playing with my baby • Teaching my baby to express feelings
	Deposits to Your Child's Feeling Bank	• Identifying my baby or toddler's special strengths
	Singing Together	• Playing with my baby
	Self-Awareness	• Identifying my baby or toddler's special strengths
	Serving the right amount	• Making mealtimes important learning opportunities
	Getting Close to My Baby	• Building a relationship with baby
	Setting Positive Limits Replacing Empty Threats with Positive Language	• Setting positive limits/positive discipline

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	Map to the Future	• Understanding the importance of managing feelings
Identifying and Labeling Emotions **Goal:** Understand the common emotions experienced by infants, toddlers, and young children; identify how these emotions may be expressed. The more emotions are discussed and their feeling and behavioral components identified, the more emotionally competent young children become.	How do I feel?	• Positively displaying my own emotions • Recognizing how my baby expresses emotion
	Feeling Books: Baby Faces Hug Making Feelings Books How Do I Love You Moody Bear Puzzle	• Identifying my baby's emotions • Labeling my baby's emotions
	Coffee Can Nesting Feeling Card Sort Feelings Game Bingo Go Fish for Feelings	• Supporting my baby's feelings
	Showing Feelings in Play	• Supporting my baby's feelings • Identifying my baby's feelings
Building Self-Regulation Skills **Goal:** Understand and identify common motivations for challenging behaviors in infancy and toddlerhood. Model and teach infants and toddlers about safe ways to express and manage their feelings and behaviors; understand that learning to manage feelings and behaviors is a long-term process, lasting throughout adulthood.	Baby's Regulating Behaviors, part 1 Baby's Regulating Behaviors, part 2	• Describing how my child deals feelings
	Helping Baby Feel Calm	• Helping my baby or toddler feel calm
	Eat Together, Eat Better I	• Reducing conflict
	Baby Signs My Child's Tools	• Describing how my child deals feelings
	What to Do About Biting What to Do If Your Child Is Bitten	• Understanding ways to handle biting
	What to Do If Your Child Is Bitten	• Understanding ways to handle biting
	Eat Together, Eat Better II	• Reducing conflict
	Help! I'm Feeling Frustrated	• Helping my toddler manage frustration
	What to Do About Tantrums	• Understanding ways to handle tantrums
	Mellow Mealtimes	• Reducing conflict
	Mealtimes and Temperament	• Describing how my baby or toddler deals feelings
	Managing Mealtimes	• Reducing conflict

	I Need it Now! Getting from Here to There (Managing Transitions) Social Stories	• Helping my toddler manage transitions

Appendix B   Chapter 2 Evidence Table

Early Social Emotional Development	Study Design	Research Questions/Hypothesis	Method	Results
Beck, L., Kumschick, I. R., Eid, M., & Klann-Delius, G. (2012). The relationship between language competence and emotional competence in middle childhood. *Emotion, 12* (3), 503-514. doi:http://dx.doi.org.ezproxy.lib.uwm.edu/10.1037/a0026320	Correlational	Language competence (LC) and emotion competence (EC) would be positively related to middle childhood. What components of LC and EC contribute to this relation. What is the general factor of ability for the two competences?	Children ages 7-10 years ($N = 210$) enrolled in primary school in Berlin, Germany. 94% monolingual German speaking 6% bilingual primary language, Vietnamese or Lingala - German secondary Measures of emotional competence, expressive emotion vocabulary, declarative emotion knowledge, awareness of mixed emotions, facial emotion recognition and language competence.	The study found significant positive correlations between EC and LC. The strongest correlations were between receptive vocabulary and declarative emotion knowledge and awareness of mixed emotions. A moderate correlation was found between expressive emotion vocabulary and facial recognition. Literacy and narrative structure correlated significantly with all emotional measures.
Blair, B. L., Perry, N. B., O'Brien, M., Calkins, S. D., Keane, S. P., & Shanahan, L. (2015). Identifying developmental cascades among differentiated	Longitudinal	1, Children with a greater ability to regulate their emotions will show higher social competence in each dimension	The study used data from 3 groups of children ages 2,5,7, and 10 years old ($N = 447$). Children were chosen for their risk for externalizing behavior measured at age 2.	A cascade effect was found for friendship quality at ages 7 and 10, and peer acceptance, social skills, and emotion regulation at ages 5, 7, 10.

dimensions of social competence and emotion regulation. *Developmental Psychology, 51*(8), 1062-1073. doi:http://dx.doi.org.ezproxy.lib.uwm.edu/10.1037/a0039472		above and beyond the prediction of the other social competence dimensions; accordingly, a model in which emotion regulation positively shapes performance on all social competence dimensions will have a better fit than models in which only a single dimension is included (Models 1–5). 2. There will be reciprocal relations across time points among the ability to regulate emotions and each of the social competence dimensions such that children with higher reported emotion regulation abilities at one time the point will show an increase in each aspect of social competence at the next time point and each aspect of social competence will be associated with children's later	Children were measured over ages 5, 7, and 10 for a cascading and sustainable effect of emotion regulation, social skills, peer group acceptance, and friendship quality.	

		ability to regulate emotion (Model 6). 3. There will be cascade effects such that the ability to regulate emotions at age 5 will be associated with change in social skills between ages 5 and 7, which will in turn be associated with peer group acceptance and friendship quality at age 10 (Model 7). 4. The cascade model will better represent the developmental processes between emotion regulation and the dimensions of social competence than the reciprocal model.		
Boldt, L. J., Kochanska, G. & Jonas, K. (2017). Infant attachment moderates paths from early negativity to preadolescent outcomes for children and parents. *Child Development, 88* (2), 584-596. doi: 10.1111/cdev.12607	Correlational	Does early relational experience influence child development?	2 Parent families and their children ($N = 102$) Child at least 15 months at the start of the study and 12 years old at the conclusion. 90% of mothers and 84% of fathers were European American. Income ranged for $40, 000 to $60, 000.	Children with insecure attachments demonstrated more negativity and externalizing behavior at 2, 5.5, 10, and 12 years.

			Attachment security was measured at 15 months. Child negativity was measured at 28, 38, 52, and 67 months. Children's externalizing behavior and the parent-child relationship was measured at 10 and 12 years of age.	
Bridgett, D. J., Gartstein, M. A., Putnam, S. P., Lance, K. O., Iddins, E., Waits, R., …Lee, L., (2011). Emerging effortful control in toddlerhood: The role of infant orienting/regulation, maternal effortful control, and maternal time spent in caregiving activities. *Infant Behavior Development, 34,* 189-199. doi:10.1016/j.infbeh.2010.12.008	Longitudinal	(1) the contribution of changes in infant orienting/regulation from 4 to 12 months of age to the emergence of toddler effortful control (EC)at 18 months of age, (2) the contributions of maternal EC to the development of infant orienting/regulation and to 18-month toddler EC, (3) the influence of maternal time spent in caregiving activities when infants were 6 months of age to the slope of infant orienting/regulation and 18-month toddler EC, and (4) the contribution of	Mother-Infant dyads followed from birth to 18 months ($N = 158$). Maternal caregivers completed the Adult Temperament Questionnaire was completed when the child was 4 months old. A caregiver survey concerning the hours they spent interacting with their infants in common activities: playing, reading, feeding, bathing, changing/dressing, and holding their infant was completed at 6 months.	Infant orienting/regulation behavior from 4 to 12 months was predictive of the emergence of effortful control at 18 months. Maternal EC predicted the amount of time spent with the infant. Toddler EC correlated with maternal time spent with the infant/toddler.

		maternal EC to subsequent maternal time spent in caregiving activities.	Infants were assessed with the: The Infant Behavior Questionnaire-Revised at 4, 6, 8, 10, and 12 months Early Childhood Behavior Questionnaire completed at 18-months	
Brophy-Herb H. E., Zajicek-Farber, M. L., Bocknek, E. L., McKelvey, L. M., & Stansbury, K. (2013). Longitudinal connections of maternal supportiveness and early emotion regulation to children's school readiness in low-income families. *Journal of the Society for Social Work and Research, 4*(1), 2-19. doi:10.5243/jsswr.2013.1	Correlational	Early maternal supportiveness and toddler emotional regulation predict school readiness.	Mother-Child Dyads (*N* = 1,258) enrolled in the Early Head Start Research Evaluation project (secondary data analysis). Utilized latent growth curve analyses to examine longitudinal connections between maternal supportiveness and toddler emotion regulation to predict children's school readiness at 5 years of age.	Maternal supportiveness and toddler emotional regulation partially mediated the risk on school readiness. Effect sizes were robust for girls and weak for boys.
Coleman-Jensen, A., McFall, W., & Nord, M. (2013). Food	Epidemiology	Prevalence of food insecurity in the U.S. in households with children.	The study focused on children from birth to 17 years. Data came	20.6 percent of households with children (8.0 million

			from annual food security surveys sponsored by USDA's economic research service and conducted by the Department of Commerce's U.S. Census Bureau.	households) were food insecure at some time during the year. In 1.0 percent of households with children (374,000 households), food insecurity among children was so severe that caregivers reported that children were hungry, skipped a meal, or did not eat for an entire day because there was not enough money for food. USDA describes these households as having very low food security among children.
insecurity in Households with children: Prevalence, severity, and household characteristics, 2010-2011. *Economic Information Bulletin Number 113, United States Department of Agriculture.* 1-49. Retrieved from https://www.ers.usda.gov/webdocs/publications/43763/37672_eib-113.pdf?v=41424				
Crugnola, C. R., Tambelli, R., Spinelli, M., Gazzotti, S., Caprin, C., & Albizzati, A. (2011). Attachment patterns and emotion regulation strategies in the second year. *Infant Behavior and Development, 34,* 136-151.	Correlation	(1) How do the attachment groups differ with respect to hetero-regulatory strategies based on positive and negative engagement? Avoidant infants would use adult-focused positive and negative heteroregulatory strategies less than other groups and that resistant infant would use adult-focused negative hetero-regulatory	Mother-infant dyads (*N* =39) infant age 3-24 months. The Strange Situation Procedure was administered. The response by the infant was coded as: • secure infant • insecure avoidant infant • insecure resistant	Secure infants demonstrated increased self-regulation than the insecure avoidant and insecure resistant infants. They also used more positive strategies for communicating requests. Object orientation strategies did not vary among the groups. Overall the secure infants were able to use a mix of

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| doi:10.1016/j.infbeh.2010.11.002 | | strategies more than other groups; (2) How do the three groups differ with respect to an orientation towards objects? Avoidant infants and secure infants would use object regulatory strategies more than resistant infants. We then asked, in an exploratory fashion as we do not have unequivocal findings in this regard: (3) How do attachment groups differ in their display of self-regulatory strategies and particularly in self-comforting strategies? (4) How do the emotion regulation strategies used by the different attachment groups vary with respect to the different level of stress involved in the episodes of the Strange Situation, divided into three groups; episodes of pre-separation with a low level of stress, episodes of separation with a high level of stress, episodes of | | strategies maintaining an open and flexible attitude. They used more mature self-regulatory strategies such as searching for their mother when absent. |

		reunion with an intermediate level of stress?		
Eamon, M. K. (2001). The effects of poverty on children's socioemotional development: An ecological systems analysis. *Social Work, 46*(3), 256-266. https://doi.org/10.1093/sw/46.3.256	Literature Review	Effects of poverty on Early socioemotional development	Applied Bronfenbrenner's Bioecological Model to review the literature on poverty and the effects on early social-emotional development.	Children's early socioemotional functioning related to poverty involve poor parental coping behaviors, psychological distress, marital discord, parenting practices that are uninvolved, inconsistent, emotionally unresponsive, and harsh.
Ellis, H. B., Alisic, E., Reiss, A., Dishion, T., & Fisher, P. A. (2014). Emotional regulation among preschoolers on a continuum of risk: The role of maternal emotion coaching. *Journal of Child and Family Studies, 23*, 965-974. doi: 10.1007/s10826-013-9752-z	Correlation	The increased family risk was expected to be associated with decreased emotion regulation in children. A relationship was expected between increased family risk and reduced maternal emotion coaching. Higher levels of maternal emotion coaching were expected to predict better child emotion regulation. Greater use of emotion coaching in mothers was expected to	Mother-child dyads (*N* = 74) child ages 46–58 months The sample was primarily Caucasian (89 %) with a minority of Hispanic (3.5 %) black (2.4 %), Asian (1 %) and other (3.5 %) participants. Laboratory visit which included self-report questionnaires, interviews: • Family Events Checklist • Negative Memory Narrative	Maternal emotion coaching partially mediated the relation between family risk and child emotion regulation. Maternal emotion coaching was only associated with a reduction in child emotional lability and not with increased adaptive regulation. The increased family risk was found to be associated with decreased maternal emotional coaching and

		partially mediate the association between risk and emotional (dys)regulation in children.	• Emotion Regulation Checklist • Family Expressiveness Questionnaire	decreased child emotional regulation.
Ensor, R., Spencer, D., & Hughes, C. (2011). "You feel sad?" Emotion understanding mediates effects of verbal ability and mother-child mutuality on prosocial behaviors: Findings from 2 years to 4 years. *Social Development, 20*(1), 94-109. doi: 10.1111/j.1467-9507.2009.00572.x	Longitudinal Correlation	Young children's emotion understanding mediates the associations between prosocial behaviors and both verbal ability and mutually responsive parent-child interactions.	First wave children between 24-36 months (*n* =140) in the second wave 125 of these children participated. At the ages of two and three, measures included (1) maternal questionnaire ratings, and (2) video-based coding of the children sharing toys or food with unfamiliar peers. At the age of four, measures included (1) maternal and teacher questionnaire ratings, (2) video-based coding of the children sharing toys and/or helping a friend, and (3) an experimental assessment of the children's intentions to share the task rewards with a friend	Emotional understanding at 36 months was associated with prosocial behavior at 48 months. Relations between verbal ability/ parent–child mutuality at the age of two and prosocial behaviors at the age of four were found.

Feldman, R. (2012). Oxytocin and social affiliation in humans. *Hormones and Behavior, 61,* 380-391. doi:10.1016/j.yhbeh.2012.01.008	Literature Review	A conceptual model detailing the process of bio-behavioral synchrony between the online physiological and behavioral responses of attachment partners during social contact is presented as a theoretical and empirical framework for the study of affiliative bonds.	Guided by an ethnological behavior-based approach	The three prototypes of affiliation are expressed in similar constellations of social behavior, and that OT is stable over time within individuals is mutually-influencing among partners, and that mechanisms of cross-generation and inter-couple transmission relate to coordinated social behavior. Research showing links between peripheral and genetic markers of OT with concurrent parenting and memories of parental care; between administration of OT to parent and infant's physiological readiness for social engagement; and between neuropeptides and the online synchrony of maternal and paternal brain response in social cognitive

				and empathy networks support the hypothesis that human attachment develops within the matrix of biological attunement and close behavioral synchrony.
Johansson, M., Marciszko, C. Gredeback, G., Nystrom, P., & Bohlin, G. (2015). Sustained attention in infancy as a longitudinal predictor of self-regulatory functions. *Infant Behavior & Development, 41,* 1-11. doi.org/10.1016/j.infbeh.2015.07.001	Correlation	Sustained attention at age 1 year predicts individual differences in self-regulatory functions at age 2 years. Higher levels of sustained attention in free play at age 1 year predicts better executive functioning and higher levels of effortful control at age 2.	Mother-infant dyads (*N*=66) ages 12-13 months at the first wave and 24 to 25 months at the second wave. The families visited the lab at both time points, and the infants were assessed using a large battery of tasks measuring attention, language, executive functioning and effortful control as part of the larger longitudinal project. Before each visit, the parents filled out a questionnaire at home with background questions and assessments of temperament. The questionnaire was	Sustained attention at 1 year predicted self - regulation at 2 years. Infant behavior during free play predicted both the eye-tracking measures of executive functioning and parental ratings of effortful control one year later.

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			either returned by mail or handed in when visiting the lab.	
Liew, J. (2012). Effortful control, executive functions, and education: Bringing self-regulatory and social-emotional competencies to the table. *Child Development Perspectives 6*(2), 105-111. doi: 10.1111/j.1750-8606.2011.00196.x	Literature Review	Review of the research regarding the connection of self-regulation and social-emotional competencies to academic success	Literature was reviewed regarding academic success constructs: effortful control, executive functions, self-regulatory and social emotional competencies.	Developmental needs of the whole child, including academic achievement and social-emotional learning, must be considered and aligned throughout the educational process, ranging from curriculum development to teacher professional development and teaching practices.
Luebbe, A. M., Kiel, E. J., & Buss, K. A. (2011). Toddlers' context-varying emotions, maternal responses to emotions, and internalizing behaviors. *Emotion, 11*(3), 697-703. doi:http://dx.doi.org.ezproxy.lib.uwm.edu/10.1037/a0022994	Correlational	A relationship exists between toddler's observed negative affect in high- and low-threat contexts and maternal perceptions of their toddlers' internalizing problems and to mothers' responses to emotions (RTE) for fear and sadness was examined.	Mother-child dyads (*N*=106) child age 2 years Toddlers participated in lab-based activities to elicit distress, and their negative affect was coded. Mothers completed measures of their child's internalizing behaviors and their responses to their toddler's fear and sadness at ages 2 and 3.	At age 2, only negative affect in low-threat contexts was associated with greater internalizing problems. Mother's punishing and minimizing response to child distress at age 2 years predicted an increase of internalizing problems at age 3.

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Maclean, P. C., Rynes, K. N., Aragon, C., Caprihan, A., Phillips, J. P., & Lowe, J. R. (2014). Mother-infant mutual eye gaze supports emotion regulation in infancy during the Still-Face paradigm. *Infant Behavior and Development, 37,* 512-522. doi:10.1016/j.yhbeh.2012.01.008	Correlation	Examined the sequential relationship between mother infant synchrony and infant affect using multilevel modeling during the Still Face paradigm	Mother-infant dyads (*N* = 89) infant age 4 months. Coding of infant self - regulation, affect and mother/infant mutual gaze was coded during Still Face exercise.	Synchronous positive interaction of mutual gaze was associated with associated with increased infant positive affect and self-regulation.
Meins, E., Fernyhaoug, Arnott, B., Leekam, S. R., & de Rosnay, M. (2013). Mind-Mindedness and Theory of Mind: Mediating roles of language and perspectival symbolic play. *Child Development, 84*(5), 1777-1790. doi: 10.1111/cdev.12061	Longitudinal	Investigated early maternal mind-mindedness (appropriate and non-attuned mind related comments) related to children's internal state language and symbolic play at age 2 and their theory of mind performance at age 4.	Mother-infant/toddler dyads (*N* = 206) Phase I children were 8 months and 24 months at phase II. During phase I maternal mind-mindedness and maternal sensitivity were assessed during mother-infant free play. At phase II toddler's internal state language and symbolic play were assessed. Children completed a battery of Theory of Mind tasks and their receptive	Mother's appropriate comments on their 8-month-olds' internal states was directly associated with children's Theory of Mind performance at age 4, but unrelated to children's acquisition of internal state language and their perspectival symbolic play at age 2. Mothers' non-attuned mind-related comments at age

			verbal ability was assessed.	8 months were negatively associated with internal state language and symbolic play, and unrelated to Theory of Mind. Higher scores for mothers' non-attuned mind-related comments at age 8 months were associated with smaller internal state vocabularies and lower levels of perspectival symbolic play at age 26 months.
Trentacosta, C. J., & Fine, S. E. (2010) Emotion knowledge, social competence, and behavior problems in childhood and adolescence: A meta analytic review. *Social Development 19*(1), 1-29. doi: 10.1111/j.1467-9507.2009.00543.x	Meta-Analysis	Examined the relation between discrete emotion knowledge and three of its most commonly studied correlates in childhood and adolescence: social competence, internalizing problems, and externalizing problems	Age. Samples were classified as containing primarily early childhood participants (ages 3–5), middle childhood participants (ages 6–11), or preadolescent/ adolescent participants (ages 9–15).	Emotion knowledge and social competence predict internalizing and externalizing problems.
Sharkins, K. A., Leger, S. E., & Ernest, J. M. (2016). Examining effects of poverty, maternal depression,	Correlational	What are the significant components that impact language and cognitive development, in young	The study explored socio-economical, health, and developmental relationships between	Results indicated strong bidirectional correlations between children's cognitive and language development.

and children's self-regulation abilities on the development of language and cognition in early childhood: An early head start perspective. Journal of Early *Childhood Education 45,* 493-498. doi:10.1007/s10643-016-0787-9		children from impoverished homes?	mother–child dyads (*N* = 122) enrolled in an Early Head Start Child age 1–36 months old.	Children's cognition and social–emotional wellbeing have a significant direct effect on their language development. social–emotional development mediated an indirect effect through language on children's cognitive development.
Ursache, A., Blair, C., & Raver, C. C. (2011). The promotion of self-regulation as a means of enhancing school readiness and early achievement in children at risk for school failure. *Child Development Perspectives, 6*(2), 122-128. doi: 10.1111/j.1750-8606.2011.00209.x	Literature Review	It focuses on relations between the development of cognitive aspects of regulation and the development of reactivity and regulation in stimulus-driven emotion, attention, and physiological stress response.	A literature review of self-regulation and the development of school readiness and academic competence in early childhood.	Children who regulate emotion have higher academic success. Children with higher emotional competence (as indexed by accuracy in identifying and modulating emotions and responding prosocially in emotionally volatile situations) are more engaged in the classroom, and teachers perceive them as more academically and socially competent than children experiencing difficulty with emotion regulation.

Valiente, C., Swanson, J., and Eisenberg (2012). Linking students/ emotions and academic achievement: When and why emotions matter. *Child Developmental Perspectives* 6(2), 129-135. doi: 10.1111/j.1750-8606.2011.00192.x	Literature Review	What is the effect of emotions on academic success? What do we know about emotions and their specific influences on academic success?	Review of literature related to progress on understanding the relations between academic achievement in relation to emotional development.	Experiencing and expressing emotions correlate with academic achievement. Emotions like anger and sadness decrease academic achievement. Emotions related to achievement are reported to be hope, love, and joy.
The Role of Parents and Family	**Study Design**	**Research Questions/Hypothesis**	**Method**	**Results**
Brady-Smith, C., Brooks-Gunn, J., Tamis-LeMonda, C. S., Ispa, J. M., Fuligni, A. S., Chazan-Cohen, R., … Fine, M. A. (2013). Mother-Infant interactions in Early Head Start: A person-oriented within-ethnic group approach. *Parenting,* 13 (1), 27-43. Doi:10,1080/1529519 2.2013.732430	Ethnography Person centered within group	Expected strong and positive associations between cluster solutions characterized by supportive mothering behaviors and child outcomes within all three ethnic groups.	European American (*n* = 740), African American (*n* = 604), and Mexican American (*n* = 322) low-income mothers and their 1-year-olds observed patterns of mothering among European American (*n* = 740), African American (*n* = 604), and Mexican American (*n* = 322) low-income mothers and their 1-year-olds who were participating in the Early Head Start Research and	three similar mothering patterns for Mexican American, European American, and African American mothers; supportive (48%-52%), directive (29%-30%), and detached (14%-19%). Harsh mothering patterns were identified in European American and African American mothers but not in Mexican American mothers. Mexican American mothers scored 52% in supportiveness, 29% in directiveness, and 19%

			Evaluation Project. Cluster analytic techniques were employed using four dimensions of mothering coded from videotapes: supportiveness, directiveness/intrusiveness, negative regard, and detachment.	in detached mothering patterns. Mean scores on discrete mothering patterns differed across ethnic groups. Mexican American detached mothering relative to supportive mothering was associated with decreases in emotional regulation at 2 years old.
Brophy-Herb, H. E., Schiffman, R. F., Bocknek, E. L., Dupuis, S. B., Fitzgerald, H. E.,Horodynski, M., ... & Hillaker, B. (2011). Toddlers' social-emotional competence in the contexts of maternal emotion socialization and contingent responsiveness in a low-income sample. *Social Development*, *20*, 73-92. doi:10.1111/j.1467-9507.2009.00570.x	Correlational	Positive emotion socialization (reflecting a high degree of positive emotional expressiveness in the home an high value of emotion coaching strategies) directly and indirectly predicts toddlers' social-emotional competence.	Early Head Start families ($N = 119$), 91% white, 5% African American, 3% Hispanic. Toddler mean age 22.61 months.	The results supported the hypothesis with small to moderate effects. Maternal contingent responsiveness to the child's cues provided a model for positive social behaviors as well as a platform for toddler's learning and practice of social-emotional skills. Contingent responsiveness is dependent on the child's ability to send clear cues, the parent's sensitivity in recognizing the cues, and the parent's response to the child's cues.

| Castro, V. L., Halberstadt, A. G., Lozada, F. T., & Craig, A. B. (2015). Parents' emotion-related beliefs, behaviours, and skills predict children's recognition of emotion. *Infant and Child Development, 24,* 1-22. doi:10.1002/icd.1868 | Within Group Comparison | 1. Children's accuracy in recognizing parents' emotions would be positively related to parents' beliefs about the value and danger of emotions, and negatively related to parents' belief that parents should guide children's socioemotional development. 2. Children's accuracy in recognizing parent's emotions would be positively associated with parents' use of labelling and teaching behaviors. 3. Parents' recognition of children's emotions would relate positively to children's recognition of parents' emotions. | 69 parent-child dyads Mothers' ages 23 to 53 years Children's ages 8-11 years Ethnicities were African American ($n =$ 34), European American ($n = 5$), and Lumbee American Indian ($n = 30$) | Child age, ethnicity, and gender were nonsignificant predictors of emotion recognition. Parent belief that socialization behavior of labeling and parents' skill in recognizing children's emotions were significantly correlated with children's recognition of parents' emotions. Parent expressive clarity was not significantly related to children's recognition of parents' emotions. Parents beliefs that emotions are dangerous and that parents should provide guidance were related to children's recognition of parents' emotions, over expressive parent expressive clarity. Parent labeling and teaching emotions failed to result in a significant change. Parents' recognition of their own emotions was positively |

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				related to children's emotion recognition above parent and child expressive clarity, the beliefs that emotions are valuable, emotions are dangerous and parents should guide, label and teach emotions.
Eisenberg, N., Spinrad, T., Eggum, N., Silva, K., Reiser, M., Hofer, C., …Michalik, N. (2010) Relations among maternal socialization, effortful control, and maladjustment in early childhood. *Development and Pscyhopathology, 22*(3), 507-525. doi: 10.1017/S0954579410 00246	Longitudinal Follow up Study	Children's effortful control (EC) at 30 months mediated the relation between mothers' supportive socialization strategies at 18 months and children's externalizing and internalizing problems at 42 months of age. In addition, paths from child maladjustment to EC and from EC to parenting was examined, as were within-time associations among parenting, EC, and maladjustment and the stability of these constructs.	Mother-child dyads at ages 18 – 30 and 42 months (*N* = 230) At each assessment, mothers and fathers were sent a packet of questionnaires by mail to complete and to bring to the laboratory visit (fathers were sent a shorter packet that did not include temperament assessments). Laboratory sessions lasted approximately 1.5 to 2 hr. As part of a series of tasks, mothers were observed interacting with their child during both free	Unsupportive (vs. supportive) parenting at 18 months predicted low levels of children's EC at 30 months, even when controlling for the stability of the constructs. unsupportive parenting was consistently correlated with low EC and high levels of maladjustment

			play and challenging puzzle tasks. In addition, toddlers' EC was assessed during a delay of gratification task. All tasks were videotaped for later coding. Mothers completed additional questionnaires in the laboratory (including a measure of reactions to children's negative emotions).	
Lauw, M. S., Havighurst, S. S., Wilson, K. R., & Harley, E. (2014). Improving parenting of toddlers' emotions using an emotion coaching parenting program: A pilot study of tuning into toddlers. *Journal of Community Psychology, 42*(2), 169-175. doi: 10.1002/jcop.21602	Pilot Study	Pilot Study of the Tuning into Toddlers program (TOTS) with 18 to 36-month-old children and their mothers.	Pilot Study of the Tuning into Toddlers program with 18 to 36-month-old children and their mothers ($N = 36$). TOTs is an emotion coaching program for mothers and their toddlers. TOTS was delivered over six weekly sessions for 2 hours per session. Measures included a pre-and post intervention questionnaire assessing parent emotion socialization and child	There were significant postintervention improvements in parents' emotion coaching and use of emotion talk and significant reductions in parents' emotion dismissing. Moderate to large effect sizes were obtained across these variables.

			behavior. The mother-child was observed in free play. Observed emotion-coaching and emotion-dismissing behaviors were coded	
Morris, A. S., Silk, J. S., Steinberg, L., Myers, S. S., & Robinson, L. R. (2007). The role of family context in the development of emotion regulation. *Social Development, 16*(2), 362-388. doi:10.1111/j.1467-9507.2007.00389.x	Literature Review	The family effects the development of emotional regulation by: • Observation • Parenting practices and behaviors • Emotional climate of the family	Applied the Tripartite Model of the impact of the family on children's emotion regulation and adjustment in a review of the literature for evidenced based practice regarding social-emotional development.	Early socialization practices set the foundation for later socialization and related developmental changes. Parents' negative reaction to emotion is associated with low quality in socialization and emotional regulation. Parents who overly encourage or discourage emotional display of negative emotion had children with more adjustment disorders. Family conflict effects children's emotional security.
Page, M., Wilhelm, M. S., Gamble, W. C., & Card, N. A. (2010). A comparison of maternal sensitivity and verbal stimulation as unique	Correlational	Maternal sensitivity and verbal stimulation predict child cognitive and social-emotional development.	A subset of the mother–infant dyads (*N* = 10,688) from the Early Childhood Longitudinal Study	As hypothesized, the study results indicated that maternal sensitivity and verbal stimulation not only contributed to cognitive development

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predictors of infant social-emotional and cognitive development. *Infant Behavior and Development*, *33*, 101–110. doi.org.ezproxy.lib.uwm.edu/10.1016/j.infbeh.2009.12.0014a65b99/1481044176280/PAT_EBHVModel_2015_sm.pdf			Birth Cohort (ECLS-B).	but also influenced social-emotional development. One unique contribution of this study was to separate individual maternal behaviors into two broad domains of maternal sensitivity and verbal stimulation, which were hypothesized to have a simultaneous influence on infant developmental outcomes. Their findings indicate that when maternal sensitivity is combined with verbal stimulation the influence on social-emotional development is greater than maternal sensitivity alone.
Rogers, M. L., A. G., Castro, V. L., Halberstadt, MacCormack, J. K., & Garrett-Peters, P. (2016). Maternal emotion socialization differentially predicts third-grade children's	Mixed Methods Exploratory Study	Mothers' belief about the value of children's emotions, their supportive reactions, and their use of cognitive reappraisal would be positively associated with children's emotion regulation, but negatively related to children's lability.	165 mother-child dyads. Children between 7.92 and 9.73 years old. African-American (n = 95), European American (n = 67), and biracial (n =3) children. A multi-method and multi-	Children's emotional lability was predicted by maternal emotion socialization factors, which was greater than children's emotion regulation, and related only to mothers'

emotion regulation and lability. *Emotion, 16*(2), 280-291. http://dx.doi.org/10.1037/emo0000142		Mothers' belief about the acceptability of expressing contempt would be positively associated with children's lability, and that their nonsupportive reactions and use of suppression would be negatively related to children's emotion regulation, but positively related to children's lability.	respondent approach utilized mothers' self-report for beliefs and behaviors, and interviews of mothers' regulatory strategies in three different emotion-eliciting situations, combined with teachers' reports of children's emotion-regulatory strategies. The study examined associations between mothers' emotion-related beliefs, reactions, and regulatory strategies and their third-grade children's emotion regulation and lability when controlling for family income, child gender, and child ethnicity.	suppression of emotion in the face of challenging emotion-related events. Child lability was positively associated with mothers': • expression of contempt for and devaluing of children's emotions • supportive reactions to children's negative emotions • Reduced use of cognitive reappraisal and reliance on emotional suppression
Spinrad, T. L., Eisenberg, N., Gaertner, B., Popp, T., Smith, C. L., Kupfer, A., . . . Hofer, C. (2007). Relations of maternal socialization and toddlers' effortful control to children's	Longitudinal Correlational	Maternal supportive emotion related socialization practices are positively related to toddlers' effortful control.	Mother-Toddler dyads Toddler ages: Time 1 - 18 months (*N* = 256) Time 2 - 30 months (*N* = 230) Tested the relations of maternal supportive	A positive link between maternal support and child effortful control was found. Children with high effortful control were lower in externalizing behaviors and separation distress

			parenting to toddlers' effortful control and social functioning at time 1 and time 2.	and higher in social competence.
Vallotton, C. D., & Ayoub, C. C. (2010). Symbols build communication and thought? The role of gestures and words in the development of engagement skills and social-emotional concepts during toddlerhood. *Social Development, 19*(3), 601-626. doi:10.1111/j.1467-9507.2009.00549.x.	Longitudinal	Do symbols help even very young children build skills for interacting with and conceptualizing the social world?	Mother-Child dyads (*N* = 108) Children's ages 14, 24, and 36 months	This study provides evidence that symbol skills, including both gestures and words, predict the development of children's social skills. The finding that early pointing facilitated the development of later social-emotional concepts reveals early symbol skills as mental tools that help children build their understanding of the social world.
Cultural Influences On Parent & Family Roles	**Study Design Evidence Level**	**Research Questions/Hypothesis**	**Method**	**Results**
Calzada, E. J. (2010). Bringing culture into parent training with Latinos. *Cognitive and*	Phenomenol-ogical	What are the important cultural processes that would improve engagement and retention? How are	Latina mothers (*N* = 12) Domican, Mexican, and Puerto Rican. Children in the families	Culturally informed programs are more likely to engage participants fully,

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Behavioral Practice, 17(2), 167-175. https://doi.org.ezproxy.lib.uwm.edu/10.1016/j.cbpra.2010.01.003		treatment mechanisms presented in a manner that makes sense in the cultural context? Are there new mechanisms of change that need to be considered? Are there mechanisms of change that need to be excluded or deemphasized? In what ways do values such as familismo and respeto confer benefit; in what ways may they increase risk?	ranged from 3 months to 3 years and from 10 to 12 years of age. Findings were from two previous studies on familismo and respeto for the clinical implication of these cultural values for parent training programs with Latinos. "etic-to emic" of cultural universal intervention parent training is modified based on culturally specific considerations	thereby increasing the possibility of long-term outcomes. Familismo is a primary consideration to engage Latino families in intervention programs. The study provides information to include family members in the program in areas of parent-child play, discipline plans, and daily routines. The incongruence of programs geared toward European American values is compared to Latino cultural values. Suggestions for cultural effective interventions with the Latino culture with young children are suggested based on the data collected.
Calzada, E. J., Huang, K, Anicama, C., Fernandez, Y., & Brotman, L. M. (2012). Test of cultural framework of parenting with Latino families of young children.	Correlational	Mother's acculturation status would be associated with their socialization messages. Acculturation would be associated with higher levels of socialization to independence and	Using a cultural framework of Latino parenting Mexican American (MA) (*n* =232) and Dominican American (DA) immigrant (*n* =210) mothers of 4-5 year old	MA mothers reported lower levels of acculturation (U.S. identity, U.S. cultural competence, English language competence) and lower ethnic cultural competence and

Cultural Diversity and Ethnic Minority Psychology, 18(3). 285-296. doi:10.1037/a0028694		enculturation would be associated with higher levels of socialization to respeto. Respeto would be associated with authoritarian parenting and independence with authoritative parenting. Socialization and parenting practices would be associated with child functioning.	children (*N* = 442) were studied for parenting practices, cultural socialization and children's behavior and school readiness.	Spanish language competence, but similar levels of ethnic identity, relative to DA mothers. MA mothers also reported higher levels of authoritarian parenting and lower levels of authoritative parenting than DA mothers. There were no ethnic group differences in socialization messages; both MA and DA mothers reported high levels of socialization to *respeto* (conceptualized as a reflection of Latino culture) as well as high levels of socialization to independence (conceptualized as a reflection of U.S. culture). According to mother report, MA and DA children had similar levels of externalizing and internalizing problems, but according to teacher report,

				DA children had higher levels of both types of problems. Finally, MA children had significantly lower school readiness, as measured by the objective DIAL test, than DA children.
Calzada, E.J., Huang, K, Linares-Torres, H., Singh, S.D., & Brotman, L.M. (2014). Maternal familismo and early childhood functioning in Mexican and Dominican migrant families. *Journal of Latina/o Psychology, 2*(3), 156-171. doi.org/10.1037/lat 0000021	Ethnography	What are the effects of respeto cultural parenting practices of Mexican and Dominican American mothers on the children's mental health and academic functioning?	(*N* =467) 4 and 5 year old children of Mexican (*n* =232) and Dominican (*n* =210) immigrant mothers in New York City	Mexican and Dominican American mothers of young children tend to rely more on the use of authoritative than authoritarian parenting practices. For both groups, authoritarian parenting was associated with higher levels of externalizing and internalizing problems in the home. Authoritarian parenting may be a risk factor for the mental health functioning of young Mexican and Dominican American children. Authoritarian parenting may signal the presence of coercive processes

				rather than protective parenting.
Calzada, E. J., Tamis-LeMonda, C. S., & Yoshikawa, H. (2013). Familismo in Mexican and Dominican families from low-income, urban communities. *Journal Of Family Issues*, *34*(12), 1696-1724. doi:10.1177/0192513X 12460218	Ethnography	The overarching aim of the present study was to examine attitudinal and behavioral familismo as a dynamic construct that moves along a continuum of costs and benefits to confer risk and protection.	Dominican American and Mexican American families (*N* = 23) who participated in one of two ethnographic studies were the participants for the present study. Qualitative Data consisted of field notes, written after each visit and interview audiotapes.	Results indicated that behavioral familismo manifests in five specific areas: financial support, shared daily activities, shared living, shared childrearing, and immigration. Familismo functions as a dynamic construct that moves along a continuum of costs and benefits, over time and across situations, with implications for children's development.
Calzada, E. J., Fernandez, Y., & Cortes, D. E. (2010). Incorporating the cultural value of respeto into a framework of Latino parenting. *Cultural Diversity & Ethnic Minority Psychology*, *16*(1), 77-86. doi:10.1037/a0016071	Phenomenology The ethnography that yielded the data are part of a series of larger, multiyear studies of the roles of multiple social settings	What are the primary cultural values for Latina mothers of How do Latina mothers view their cultural values in relation to mainstream U.S. American values? Assuming that respeto is a primary Latino value: How is respeto manifested in young children? How do Latino parents socialize their children to show respeto? How does respeto change with generational status?	Female primary caregivers (*N* = 48) of 3- to 6-year-old children in a large Northeastern city of Dominican (*n* = 31) and Mexican (*n* =17) heritage	Findings suggest respeto plays a predominant role in child rearing and underlies many of the practices during the preschool years. Four subdomains were identified to capture the behavioral manifestations of respeto as obedience to authority, deference, decorum, and public behavior.

	on developmental processes in ethnically diverse and immigrant families in New York City.			
Chaudhuri, J.H., Easterbrooks, M.A., & Davis, C.R. (2009). The relation between emotional availability and parenting style: Cultural and economic factors in a diverse sample of young mothers. *Parenting Science & Practice, 9* (3/4), 277-299. doi: 10.1080/152951909 02844613	Correlational	Examine emotional availability, parenting attitudes, and parenting behaviors in relation to parenting style and cultural context in a diverse group of young mothers.	First time adolescent mothers ($N = 313$) of toddler aged children from the European American 45% , Latin American 42%, and African American 13% culture.	Three parenting styles emerged from the data: democratic, strict loving, and directive. The democratic and directive parenting styles were related to maternal ethnicity; European American mothers were more highly represented in the democratic parenting group and Latin American mothers were more highly represented in the directive parenting group.
Friedlmeier, W., Corapci, F., & Cole, P. M. (2011). Emotion socialization in cross-	Literature Review	Emotion socialization differences across cultures	Empirical emotion socialization research was contrasted from the United States and	Summary of current research regarding caregivers' emotion socialization strategies

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			Germany with studies from China, Nepal, Turkey, India, and Mexico.	toward children's negative emotional expressions and related behaviors in cultural perspectives.
cultural perspective. *Social and Personality Psychology Compass, 5*(7), 410-427. doi:10.1111/j.1751-9004.2011.00362.x				
Gassman-Pines, A. & Skinner, A. T. (2017) Psychological Acculturation and Parenting behaviors in Mexican immigrant families. *Journal of Family Issues,* 1-26. doi: 10.1177/0192513X16687001	Longitudinal Correlational	1.What is the relation between Mexican-immigrant mothers' and fathers' psychological acculturation to their own warm, aversive, and withdrawn parenting behaviors? 2: What is the relation between Mexican-immigrant mothers' and fathers' psychological acculturation and the other parent's warm, aversive, and withdrawn parenting behaviors?	Early child sample Children between the ages of 3 and 5 years and their parents. (*n* =186) Middle child sample Children between the ages of 8 and 9 years and their parents (*n* = 47) Interviews were conducted in participants' homes or at another location chosen by the participants.	Results indicate that parents' psychological acculturation and their parenting behaviors begin when children are young, during developmental periods when the family is the central context for children's development. Parents with bicultural orientations have more warm and affectionate behaviors, and fewer hostile, and neglectful and indifferent behaviors.
Ispa, J. M., Csizmadia, A., Rudy, D., Fine, M. A., Krull, J. L., Bradley, R. H., & Cabrera, N. (2013). Patterns of maternal directiveness by ethnicity among Early Head Start research participants. *Parenting: Science &*	Longitudinal Cohort Study Early Head Start Research and Evaluation Project data set	(1) What are the patterns of directiveness observed over time among low-income European American, African American, and Mexican American mothers beginning when their children were 1 year of age and continuing until they were 5? (2) In each group,	European American (*n* = 938), African American (*n* = 849), and Mexican American (*n* = 465) mother-child dyads Children ages 1, 2, 3, 4, and 5 years old. Directiveness was measured over time	(1) European mothers were the least directive (2) Child engagement was associated equally with directiveness in all groups. (3) In European American and

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Practice, 13(1), 58-75. doi:10.1080/15295192. 2013.732439		was maternal directiveness related to patterns of change in children's positive engagement and/or negativity in relation to their mothers? (3) Did maternal positive and negative regard toward the child moderate associations between maternal directiveness and growth patterns in these child behaviors in the three groups?	during mother-child play.	Mexican American families only, mothers' positive regard moderated the positive association between directiveness and child negativity. (4) In European American families, directiveness was associated with higher levels of child negativity and low levels of positive
Jahromi, L. B., Guimond, A. B., Umaña-Taylor, A. J., Updegraff, K.A., & Toomey, R. B. (2014). Family context, Mexican-origin adolescent mothers' parenting knowledge, and children's subsequent developmental outcomes. *Child Development, 85*(2), 593-609. doi:10.1111/cdev.1	Correlational	What are the consequences of adolescents' parenting knowledge for their children's later developmental outcomes? What are the outcomes of dimensions of social support provided by mother figures of adolescent mothers?	Mexican origin adolescent mothers (*N* = 191). Home visits were conducted with the mothers and their children to measure knowledge of parenting and outcomes of the children's development. The visits started prenatally then progressed. Data were collected in three waves: (1) Pregnancy	The Mexican origin adolescent mothers had underestimation errors and accuracy errors concerning the social domain of development when compared to their U.S. born counterparts. However, there was a relationship to the level of social domain knowledge and positive social development in their children. Adolescent support and resources significantly predicted child

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				(2) Child was 10 months old (3) Child was 24 months	developmental outcomes in relation to knowledge of child development.
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Mistry R.S., Biesanz J.C., Chien N., Howes C., Benner A.D. (2008). Socioeconomic status, parental investments, and the cognitive and behavioral outcomes of low-income children from migrant and native households. *Early Childhood Research Quarterly*, *23*, 193–212. doi.org/10.1016/j.ecresq.2008.01.002	Correlational	Relations among indicators of socioeconomic status, parental investments, and children's behavioral outcomes.	Low income families (*n* = 257) Immigrant and native families (*n* = 1202)	Results indicated that among both immigrant and native households, maternal education, as compared to household income or welfare receipt, was the strongest predictor of a composite of socioeconomic status (SES). Path analyses estimated direct and indirect effects of SES and revealed greater similarity than difference in the *processes* by which SES influences immigrant and native children's preschool outcomes. Language/literacy stimulation and maternal supportiveness mediated the relations of SES to children's cognitive outcomes among both immigrant and

				native families. In contrast, parenting stress mediated the effects of SES on children's aggressive behavior among native, but not immigrant, households.
Nuñez, A., González, P., Talavera, G. A., Sanchez-Johnsen, L., Roesch, S. C., Davis, S. M., . . . Gallo, L. C. (2016). Machismo, marianismo, and negative cognitive-emotional factors: Findings from the Hispanic community health study/study of Latinos sociocultural ancillary study. *Journal of Latina/o Psychology, 4*(4), 202-217. http://dx.doi.org.ezproxy.lib.uwm.edu/10.1037/lat0000050	Correlational	Endorsement of traditional machismo and marianismo beliefs relate to higher levels of negative cognitions and emotions. The relationships between gender roles and negative cognitive-emotional factors are modified by gender, acculturation and Hispanic background.	Participants were aged 18–74 years and self-identified as Hispanic of Central American, Cuban, Dominican, Mexican, Puerto Rican, South American, and other Hispanic background (N _ 4,426).	Specific components of machismo (traditional machismo) and marianismo (family and spiritual pillar dimensions) were associated with higher levels of negative cognitions and emotions after adjusting for sociodemographic factors these associations remained consistent across sex, Hispanic background group, and acculturation. Findings can inform mental health interventions and contribute to our understanding of the importance of gender role socialization in the context of self-reported negative cognitive-

				emotional factors in Hispanics.
Oades-Sese, G.V., Esquivel, G.B., Kaliski, P.K., & Maniatis, L. (2011). A longitudinal study of the social and academic competence of economically disadvantaged bilingual preschool children. *Developmental Psychology, 47*(3) 747-764. doi: 10.1037/a0021380	Longitudinal Between group Comparison	Study 1 What are the characteristic profiles of bilingual low income preschool children in terms of cognitive ability, bilingualism, temperament, emotion regulation, autonomy, and acculturation? 2. Which profiles demonstrate social competence? Study 2 1. Do profiles of social competence, identified in preschool, predict academic achievement 2 years later? 2. Which preschool profiles demonstrate the most growth in English oral language skills 2 years later?	Study 1 Preschool Latino children ages 3-5 years (*N* = 117) Study 2 Latino children ages 5 to 7 years (*N* = 90)	The findings of Study 2 indicated that low-income bilingual children identified as socially competent during preschool were associated with significantly better academic outcomes two years later than children who were identified as vulnerable. These children had attained the basic social-emotional and linguistic abilities presumed to be precursors of performance in reading and math two years later.
Perez Rivera, M. B., & Dunsmore, J. C. (2011). Mothers' acculturation and beliefs about emotions, mother–child emotion discourse, and children's emotion	Correlational	Mothers with greater Latino enculturation are more likely to believe that it was their responsibility to guide their children's emotions. Mothers higher in Latino enculturation would more strongly believe that	Latina mothers (*N* = 40) with their preschool-age child, mean child age 54.27 months. Country of origin: 52% Mexico, 5% Argentina, 2.5%	Mothers with greater Latino enculturation were more likely to believe that it was their responsibility to guide their children's emotions.

understanding in Latino families. *Early Education & Development, 22*(2), 324-354. http://dx.doi.org.library1.unmc.edu:2048/10.1080/10409281003702000		emotions can be dangerous and that mothers higher in Anglo acculturation would more strongly believe that negative emotions are valuable. Anglo acculturation would be related to mothers' belief that children can learn about emotions on their own There are linkages between mothers' beliefs and emotion talk.	Colombia, 5% El Salvador, 2.5% Honduras, 5% Peru; 28% did not report. Studied the associations among Anglo acculturation, Latino enculturation, maternal beliefs, mother–child emotion talk, and emotion understanding in 40 Latino preschool-age children and their mothers. Mothers self-reported Anglo acculturation.	There were no significant relations of Anglo acculturation and Latino enculturation with mothers' emotion talk. No significant support for relations between mothers' emotion talk and children's emotion understanding was found. Linkages between mothers' beliefs and emotion talk were partially supported.
Sanders, M.R., & Kirby, J.N. (2012). Consumer engagement and the development, evaluation, and dissemination of evidence-based parenting programs. *Behavior Therapy, 43*, 236–250 Retrieved from https://www-clinicalkey-	Literature review and discussion	What consumer engagement strategies applied to parenting program development, evaluation, training, and dissemination can be applied to improve interventions.	Review of literature for consumer engagement strategies applied to parenting program development, evaluation, training, and dissemination.	In order for a program to have success consumers and developers are needed to collaborate on the contents and delivery. This approach permits program developers to more readily identify strengths and limitations to parent participation.
Smith-Morris, C., Morales-Campos, D., Castaneda-Alvarez, E. A., & Turner, M.	Multiyear, Multisite Cross-Sectional	Participants were asked about the experiences of migration, dietary culture	Participants (*N* = 90) were interviewed in their homes or community locations.	Familismo themes identified: The family is the main cause for migration to

(2012). An anthropology of familismo: On narratives and description of Mexican migrants. *Hispanic Journal of Behavioral Sciences, 35*(1) 35-60. doi:10.1177/07399863 12459508	Ethnographic study	change, and considerations of the family.		the United States and a reason to return to Mexico to rejoin the family. Migration was often due to creating a better life for the family. A high value was placed on familismo. Cultural representation of familismo was not static as relics of a common cultural heritage, but are living value systems that speakers reference, deploy, and manipulate for multiple goals and agendas, even during interviews and surveys. Values of familismo include meals ideally as a family time, but that family mealtime are legitimately made secondary to work concerns in all 3 communities (Mexican village, Mexican town, and Dallas migration site). However, family members do not eat alone. Children eat first if they are hungry, then

				the parents eat together when one spouse works.
Sotomayor-Peterson, M., Figueredo, A.J., Christensen, D.H., & Taylor, A.R. (2012) Couples cultural values, shared parenting, and family emotional climate with Mexican American Families. *Family Process, 51*(2), 218-233. doi: 10.1111/j.1545-5300.2012.01396.x.		Mexican American parents' endorsement of the cultural values of familismo and simpatia predicted shared parenting, which in turn, predicted family emotional climate.	The participants were 61 couples of Mexican origin that were part of a larger longitudinal study Parenting and Children's Emotion (PACE) project.	The study results indicate that strong Mexican cultural values of familismo and simpatico predicted co-parenting and a positive emotional family environment.
Varela, E. R., Steele, R. G., & Benson, E. R. (2007). The contribution of ethnic minority status to adaptive style: A comparison of Mexican, Mexican American, and European American children. *Journal of Cross Cultural Psychology, 38*(1), 23-33.	Correlational	Simpatia and collectivism would be related to high defensiveness and that these cultural constructs would result in the highest number of repressors for the Mexican group.	Mexican American (*n* = 50), European American (*n* = 50), Mexican national children living in two parent families. Comparison of repressive adaptive style (RAS) in European American, Mexican American, and Mexican children and examine the association of RAS to the traditional values of	Results did not support the hypothesis that ethnic minority status in the United States contributes to the adoption of a RAS as the prevalence of RAS was similar across Mexican American (MA) and European American (EA) samples. Thus, to the extent that MA children experience stigmatization similarly to AA children, results

	Study Design	Research Questions/Hypothesis	Method	Results
doi:10.1177/00220221 06295439			simpatico and collectivism	suggested that this exposure does not appear to consistently result in the adoption of RAS.
Vargas, J. H., & Kemmelmeier, M. (2013). Ethnicity and contemporary American culture: A meta-analytic investigation of horizontal-vertical individualism-collectivism. *Journal of Cross-Cultural Psychology, 44*(2), 195-222. doi:10.1177/00220221 12443733	Meta-Analysis	Hypothesized that cultural convergence would predict diminished group differences in individualist and collectivist values.	A meta-analytic integration of all available studies that relied on Triandis' (1995) Horizontal and Vertical Individualism and Collectivism scale, and that compared African, Asian, Latino, and European Americans.	Cultural convergence did not predict diminished group differences in individualist and collectivist values among African, Asian, Latino, and European Americans. European Americans scored higher in vertical individualism than Mexican Americans. There was also significance in vertical individuality in Latino Americans which was negatively correlated with vertical collectivism.
IV. Social Emotional Parenting Curricula	**Study Design**	**Research Questions/Hypothesis**	**Method**	**Results**
Chaffin M, Hanson R., Saunders B. E., Nichols T., Barnett D., Zeanah C., …..Miller-Perrin C.	Literature and Practice Review	Best practices in attachment therapy	A task force charged by the American Professional Society on Abuse of Children to examine current	Recommend that cultural issues should be considered regarding attachment therapy in assessment and

			practices related to theory, evidence, diagnosis, and treatment of children described as having attachment related conditions and problems and making recommendations for action.	diagnosis and that interventions address cultural sensitivity. Please see the article for further recommendations which are not mentioned due to the lack of pertinence to the current study.
(2006). Report of the APSAC task force on attachment therapy, reactive attachment disorder, and attachment problems. Child Maltreatment, *11*(1), 76–89. doi:10.1177/10775 59505283699				
Cooper, G., Hoffman, K, Marvin, R. S., & Powell, B. (2000). Treatment-assumptions. *Circle of Security*. Retrieved from https://www.circleo fsecurityinternation al.com/treatment-assumptions	Parenting Curriculum	Circle of Security Early Childhood	Parent-child attachment facilitated by a professional Parent education and group therapy based on attachment theory Parent reflection regarding a video recorded staged interaction between a parent and child Includes viewing from the parent perspective then applying empathy to view from the child perspective	Problem based focus on repairing attachment related to parenting that is: dismissing/avoidant preoccupied/ambivalent unresolved/disorganized
Dishion, T., Forgatch, M., Chamberlain, P., & Pelham, W. E.	Review	Focused on the evolution of the Oregon model of family	Outcomes for PMTO prevention and treatment	Moderate to large effective in reducing problem behavior in

(2016). The Oregon Model of Behavior Family Therapy: From intervention design to promoting large-scale system change. *Behavior Therapy, 47,* 812-837. doi:10.1016/j.beth.2016.02.002		behavior therapy (PMTO) over four decades.	programs are based on randomized controlled trials, multiple-method and -agent assessment, and follow-up periods from 1 to 9 years.	children and increasing positive parenting.
Hoffman, K. T., Marvin, R. S., Cooper, G., & Powell, B. (2006). Changing toddlers' and preschoolers' attachment classifications: The circle of security intervention. *Journal of Consulting and Clinical Psychology, 74*(6), 1017-1026. doi:http://dx.doi.org.ezproxy.lib.uwm.edu/10.1037/0022-006X.74.6.1017	Longitudinal Within Group Comparison	Predicted a significant decrease in disorganized attachment classifications and a significant decrease in insecure attachment classifications.	A purposeful sample of Children and their primary caregiver (*N* = 65) enrolled in Head Start and Early Head Start. Caregiver-child dyads were 86% European American, below the poverty level, and identified as either having an insecure attachment or a risk for an insecure attachment.	Results of the study found that 45 of the participants shifted from an insecure attachment with 30 moving toward a secure attachment.
Kelly, J. F., Zuckerman, T. & Rosenblatt, S. (2008). Promoting First Relationships:	Preliminary Study of the Promoting First	Increase the ability of service providers to enhance the quality of	Set of 17 PRF privider training handouts: (1) the description of the specific provider	The results indicated improved early social-emotional parenting skills. The mothers were

| A relationship-focused early intervention approach. *Infants & Young Children, 21*(4), 285-295. doi:10.1097/01.IYC.0000336541.37379.0e | Relationships (PFR) curriculum. | parent-child relationships using the PFR. | consultation strategies for promoting healthy caregiver-child relationships; (2) social and emotional needs specific to the infant-toddler period; (3) caregiving qualities and activities that promote security, trust, and emotion regulation during infancy (eg, individualized attention, empathy, labeling, and organizing feelings and emotions, and predictability); (4) additional caregiving qualities and activities that promote healthy identity formation in the toddler years, including motivation, and social competence (eg, managing feelings of distress, offering rituals and routines, encouraging | more sensitive to the infants, providing social-emotional and cognitive growth fostering and increasing contingency interactions. Children improved in responsiveness to their mothers, with greater contingent interactions. |

			exploration, independence, and cooperation through appropriate choices, and limits (5) intervening with challenging behaviors (eg, assessing through discussions and observations, identifying young children's feelings and unmet needs, identifying possible causes for challenging behaviors, reframing the behaviors for caregivers, and developing individualized intervention plans); and (6) exploring the parent's own sense of self, emotion regulation, and support that influence the caregiving environment.	
O'Connor, T. G., Matias, C., Futh, A., Tantam, G., & Scott, S. (2013). Social Learning	Experimental	Improvements in parenting would also result in the stronger parent-child attachment.	Randomized sample of mother-child dyads (child age 4-6 years) was assigned to a social learning theory based	Parents in the intervention group showed increased in behavioral counts and sensitive responding.

			parenting program plus a reading program ($n = 88$) and non-intervention ($n = 86$) Home visit based interventions of the 12-week Incredible Years school aged program.	Attachment narratives were moderately associated with parenting changes.
Theory parenting intervention promotes attachment-based caregiving in young children: Randomized clinical trial. *Journal of Clinical Child & Adolescent Psychology, 42*(3), 358-370. doi:10.1080/15374 416.2012.723262				
Oxford, M.l., Marcenko, M., Fleming, C. B., Lohr, M. J., & Spieker, S. J. (2016). Promoting birth parents' relationships with their toddlers upon reunification: Results from Promoting First Relationships home visiting program. *Child Youth Service Review, 61,* 109-116. doi:10.1016/j.child youth.2015.12.004	Pseudo-Experimental	Parents who received Promoting First Relationships (PFR) would demonstrate improvements in their self-report of understanding toddler's behavior, reductions in perceiving the child as difficult and reporting a dysfunctional parent-child relationship; improvements in observed parental sensitivity and parental support and a reduction of parent report of child behavior problems. Children would have an increase in observed self-regulation,	Parent-child dyads in reunification post foster placement ($N = 56$) child age 10-26 months 18 received the PFR intervention and 25 were in the comparison group. The intervention group received 10 (60-75 minute) sessions of the PFR intervention. The control group received 3 (90 minutes) instructions in early child development and referral service programs.	The results showed no significance between the PRF intervention group and the control group.

		exploration of novel stimuli, engagement with a parent, and a secure based behavior among the children in the families who received the PFR relative to the comparison group.		
Perrin, E. C., Sheldrick, R. C., McMenamy, J. M., & Carter, A. S. (2014). Improving parenting skills for families of young children in pediatric settings: A randomized clinical trial. *Journal of the American Medical Association Pediatrics*,*168*(1), 16–24. doi:10.1001/jamapediatrics.2013.2919	Experimental	To investigate the feasibility and effectiveness of parent=training groups delivered to parents of toddlers in pediatric care settings.	Child age 22 to 44 months Parent-child dyads (n = 150) enrolled in pediatric outpatient primary care. The intervention group received 10 sessions of the Incredible Years parenting curriculum and the control group was placed on a waiting list and did not receive an intervention. The interventions were received at the clinic by a trained psychologist.	The results provided significance for strong feasibility and effectiveness of the Incredible Years training over the control group.
Pontoppidan, M., Klest, S. K., & Sandoy T. M. (2016). The Incredible Years Parents and Babies Program: A pilot randomized controlled trial. *PLOS, 11*(12), 1-	Pilot Study	Studied the Incredible Years Parents and Babies Program to determine the use as a universal intervention with parent/ baby dyads.	A randomized sample of parents from Denmark with newborns (N = 112). Intervention group (n = 76) Control group (n = 36)	There were no primary effects of the IYPB as a universal intervention with parent/baby dyads over the control group.

21. https://doi.org/10.1371/journal.pone.0167592				
Rogers, M. L., Halberstadt, A. G., Castro, V. L., MacCormack, J. K., & Garrett-Peters, P. (2016). Maternal emotion socialization differentially predicts third-grade children's emotion regulation and lability. *Emotion, 16*(2), 280-291. http://dx.doi.org/10.1037/emo0000142	Correlational	Mothers' beliefs about the value of and contempt for children's emotions, mothers' supportive and non-supportive reactions to their children's emotions, as well as mothers' use of cognitive reappraisal and suppression of their own emotions would contribute unique variance to their children's emotion regulations and lability.	Mother/child dyads (*N* = 165). Child ages between 7 and 9 years of age. African American (*n* = 95), European American (*n* = 67), and biracial (*n* = 3) The study was conducted in a lab where mothers completed a questionnaire about beliefs concerning children's emotions and were interviewed about regulatory strategies regarding three emotion vignettes. The teachers of the children were asked to complete a questionnaire regarding the children's emotional regulation.	Mother's beliefs that children's emotions are not of value, the expression of contempt for children's emotions, supportive reactions to children's negative emotion, mother's reduced use of cognitive reappraisal and reliance on emotional suppression were all predictive of children's emotional lability.
Spieker, S. J., Oxford, M. L., Kelly, J. F., Nelson, E. M., & Flemming, C.	Randomized control trial	PFR would result in improved parenting	Toddlers (10 – 24 months; N = 210) with a recent	Caregiver sensitivity improved more in the PFR

B. (2012). Promoting First Relationships: Randomized trial of a relationship-based intervention for toddlers in child welfare. *Child Maltreatment,17*(4), 271-286. doi:10.1177/10775595 12458176		and child outcomes relative to a comparison condition in which families received homebased services that were not relationship-focused.	placement disruption received a randomized 10-week PFR or a comparison condition.	condition than in the comparison condition. Caregiver understanding of toddlers' social emotional needs and caregiver reports of child competence also differed by intervention condition post-intervention with caregivers in the PFR condition reporting more understanding of toddlers and child competence. Models of PFR effects on within-individual change were significant for caregiver sensitivity and understanding of toddlers. At the 6-month follow-up 61% of original sample dyads were still intact and there were no significant differences on caregiver or child outcomes.
White, C. & Webster-Stratton, C. (2014). The Incredible Years Baby and	Curriculum explanation	Explanation of the Incredible Years Baby and Toddler Parent Program. (IYBT)	The IYBT serves parents and babies/toddlers from 6	The parents and baby (6 weeks to 1year old) attend 2-hour weekly sessions for 10-12. The

			weeks to 3 years of age. The IYBT has a choice of home or group based delivery. However, the group setting is the preferred delivery method due to member support	goal of the sessions is to engage the parent and baby in practice of lessons regarding physical and language development, feeling of love and security, and providing a safe environment. From the ages of 1 to 3 years, the mother attends the program without the child, who is placed in daycare. Parents learn social-emotional coaching, encouraging language development, teaching self-regulation, and friendship skills.
Relevancy of Cultural Roles in Adaptation and Application	**Study Design Evidence Rating**	**Research Questions/Hypothesis**	**Method**	**Results**
Bernal, G. (2004). Intervention development and cultural adaptation research with diverse families. Family Process, *45*, 143–152.	Literature Review	Review of the literature (*N* = 7) concerning intervention development and cultural adaptation research with diverse families	(1) highlight different approaches to intervention development research and adaptation of treatments for work with families of diverse populations; (2) present	Each study was reviewed individually for cultural adaptations which included: Collaboration with the culture prior to developing a pilot study for interventions,

Toddler Parent Programmes: Promoting attachment and infants' brain development. *Parent Education Programme, 1*(2), 1-5. Retrieved from http://www.incredibleyears.com/wp-content/uploads/Incredible-Years-baby-toddler-programmes-promoting-attachment-2014.pdf

			illustrative studies of empirical research in intervention and treatment development that uses novel qualitative and quantitative approaches; and (3) provide examples of successful innovative approaches in the different phases of adaptation and intervention development that relate to culturally responsive approaches to diverse populations.	Incorporating family spirituality and cohesion, qualitative research results used to create the curriculum, engaging cultural consultants, intensive interviews of families with the culture, modifications of the treatment protocol to fit the cultural practices and beliefs.
Castro, F.G., Barrera, M., & Martínez, C.R. (2004). The cultural adaptation of prevention interventions: Resolving tensions between fidelity and fit. Prevention Science, 5(1), 41–45. doi:10.1023/B:PREV.0000013980.12412.cd	Literature Review	Review of programs for cultural adaptation based on science and relevance.	A literature review of the complex programmatic issues from a research perspective for program adaptation that emphasizes the motivating participation of ethnic groups. Issues of fidelity and adaptation are addressed.	Issues of program adaptation are emphasized with fidelity. The adaptation of a program that is appealing at the surface for cultural groups but does not meet fidelity in the application is not evidenced based nor is it an effective adaptation. The purpose of adapting curriculum for cultural relevance is to ensure the intervention is

				science based. Various programs are reviewed for the mismatch in scientific and cultural relevance refer to the article for specificity. Many adapted programs are not tested for fidelity.
Cabrera, N. J., Shannon, J. D., & Jolley-Mitchell, S. (2013). Co-parenting in Latino families. In S. S. Chuang & C. S. Tamis-LeMonda (Eds.), *Advances in immigrant research: Gender roles in immigrant families* (pp. 6-26). New York: Springer	Review of the literature	1.Key predictors of co-parenting regarding Latino families and the link to parenting and child development. 2.Review of theoretical and empirical research of co-parenting, that includes predictors and implications for parenting and child development. 3.New directions in co-parenting research in Latino families with the role of intervention and prevention programs.	N/A	Co-parenting across cultures is shaped by parents' beliefs, values, desires, and expectations. This chapter reviews the literature regarding the Latino family and the influences of and to co-parenting regarding: • Cultural Construction • Gender roles • Individual, family, and extrafamilial influences • Associations to parenting • Child well-being • Directions for research • Intracultural variation

Chuang, S. S., Tamis-LeMonda, C. S. (2013). Current perspectives on gender roles and relationships in immigrant families. In S. S. Chuang & C. S. Tamis-LeMonda (Eds.), *Advances in immigrant research: Gender roles in immigrant families* (pp. 1-5). New York: Springer	Review of the literature	How gender roles and gendered relationships in immigrant families play out in the lives of children and families.	N/A	Gender is discussed in relationship to parenting roles and responsibility, social construction regarding the rights, duties, and behaviors within a cultural perspective.
Domenech-Rodriguez, Donoviick, M. R., & Crowley, S. L. (2009). Parenting styles in a cultural context: Observations of protective parenting in first-generation Latinos. *Family Process, 48*(2), 179-194. doi: 10.1111/j.1545-5300.2009.01275.x	Literature Review	Examine the findings in the literature regarding Latinos' parenting style.	Identification of Latino parenting styles through direct parent-child observation. Fathers ($n = 46$) Mothers ($n = 49$) Average age of child 6.64 years Families were first generation immigrant	Latino parents demonstrated high levels of warmth, high demandingness, and medium to low autonomy granting permission. Authoritarian, cold, and neglectful parenting styles were not identified in the participants. Traditional forms of parenting style identified with European American families only

				accounted or 33% of the families.
Filene, J. H., Kaminski, J. W., Valle, L. A. & Cachet, P. (2013). Components associated with home visiting program outcomes: A meta-analyses. *Pediatrics, 131* (S100), 100-109. doi:10.1542/peds.2013-1021H	Meta-Analysis	The literature was analyzed for 6 outcome criteria (a) birth outcomes, (b) parenting behavior and skills, (c) maternal life course, (d) child cognitive outcomes, (e) child health, and (f) child maltreatment.	Home visitation outcome literature ($N = 51$) was analyzed. Literature inclusion criterion was at-risk families with children from birth to 36 months, and with pregnant mothers. Another criterion for the selection was that results were applicable to the general population of typically developing children. Therefore, home visitation programs that focused on families with developmental disabilities, chronic illness, feeding disorders, and bereavement were excluded. The literature was also excluded if there were only 1 to 2 home visits, and if the home visit purpose related to an	The results of the study found that home visitation programs did not as a whole provide significant effect size, but that specific components of programs did. Positive outcomes for the 6 criteria were found for home visitation programs with components of teaching sensitive and respondent parenting, teaching discipline and behavior management techniques, and teaching problem-solving. Of the 6 outcomes measured only maternal life course, child cognitive outcomes, and parent behaviors and skills were significant for effect size.

				identified family problem.
Kaminski, J. W., Valle, L. A., Filene, J. H., & Boyle, C. L. (2008). A meta-analytic review of components associated with parent training program effectiveness. *Journal of abnormal child psychology*, *36*(4), 567-589. doi: 10.1007/s10802-007-9201-9	Meta-Analysis	The objective of the study was to determine which program-specific components were associated with successful outcomes that targeted the prevention and/or remediation of early childhood behavior problems.	Analysis of empirical literature (*N* = 77 studies) regarding early childhood intervention programs (children ages 0 to 7 years) Utilized publications from 1990 to 2002.	The following program specific parent training components were correlated with the prevention and/or intervention of early childhood behavior problems: • Creating positive interactions. • Emotional communication
Parker, A. E., Halberstadt, A. G., Dunsmore, J. C., Townley, G., Bryant Jr, A., Thompson, J. A., & Beale, K. S. (2012). "Emotions are a window into one's heart": A qualitative analysis of parental beliefs about children's emotions across three ethnic groups. *Monographs of the*	Ethnography	The goal of this study was to determine how culture or ethnicity may inform perspectives on parents' and children's experiences of emotion in the family. Rather than simply describing differences between ethnic groups, the goal was to show how cultural backgrounds may influence emotion-related beliefs and behaviors	Qualitative data gathered from focus groups (*N* = 12). Focus groups were set up to represent same cultures with a leader of that culture. The parents from each cultural group were provided with the opportunity to tell their own personal stories or narratives, and in so doing, share who they are as parents, as well as their	18 themes were identified that demonstrated how ethnic beliefs influenced emotional experiences in the family.

			emotional experiences in the family during the focus group discussions. Parents (N = 87) were African American (n = 36), European American (n = 27), and Lumbee American Indian (n = 24). The focus groups consisted of 6- 12 parents.	
Parra-Cordona, J. R., Domenech-Rodriquez, M., Forgatch, M., Sullivan, C. Bybee, D., Holtrop, K., …..Bernal, G. (2012). Culturally adapting an evidence-based parenting intervention for Latino immigrants: The need to integrate fidelity and cultural relevance. *Journal of Family Process, 51*(1), 56-72. doi: 10.1111/j.1545	Fidelity of the Criando con Amor: Promoviendo Armonia y Superacion, Domenech Rodriguez, 2008	How relevant do participants believe it would be to culturally adapt and disseminate a parenting intervention aimed at supporting their parenting efforts? What components should be included in the adapted parenting intervention in order to increase parents' motivation to participate, as well as their level of satisfaction with the adapted intervention?	Participants were from the Midwestern United States. Latino parents (N = 80) (participants country of origin was Mexico (n = 60), Cuba (n = 7), Columbia (n = 4) Costa Rica (n = 3), Guatemala (n = 3), Nicaragua (n = 2), Honduras (n = 2), and El Salvador (n = 2) with children between the age of 3 and 17 years participated in the study. Used a grounded theory approach utilized focus groups comprised of Latino parents to	Cultural Relevance: The level of trust contributed to high retention, participant satisfaction, and intervention completion. Parents in the study reported high satisfaction with the inclusion of cultural values and the ability to reflect on the immigration experience and biculturalism.

				explore the relevance of culturally adapting the Criando con Amor: Promoviendo Armonia y Superacion	
Parra-Cardona, J., Holtrop, K., Cordova D Jr., Escobar-Chew AR., Horsford S., Tams L., … Fitzgerald H. E. (2009). 'Queremos aprender': Latino immigrants' call to integrate cultural adaptation with best practice knowledge in a parenting intervention. *Family Process, 48*(2), 211-231. doi/10.1111/j.1545-5300.2009.01278.x	Exploratory Ethnographic	How relevant do participants believe it would be to culturally adapt and disseminate a parenting intervention aimed at supporting their parenting efforts? What components should be included in the adapted parenting intervention in order to increase parents' motivation to participate, as well as their level of satisfaction with the adapted intervention?	Focus group interviews were conducted with Latino parents (*N* = 83) Participants were first generation Latino, identified Spanish as their preferred language, had children between the ages of 3 and 17 years. A total of 11 focus groups was conducted with between 5 to 13 in each group.	Five categories were found related to relevant expectations of participants concerning parenting interventions: Contents are relevant to the Latino culture and not European American Culture. Include Familismo as a component with an emphasis on instilling values to children. Respeto regarding authority and family Explanations of acceptable discipline Simpatico – Learning and helping each other Empowering and community focus
Vesely, C., Ewaida, K., & Anderson, E. A. (2014). Cultural competence of parenting education programs used by Latino families: A	Literature Review	(1) review recent, evaluated parenting education programs utilized by Latino families with young children; (2) examine the level of cultural competence of all aspects of	Analyzed the cultural competence of 13 parenting programs for Latino families with young children.	Recommendations: (1) consider the importance of context for cultural competence; (2) recognize that cultural

review. *Hispanic Journal of Behavioral sciences, 36*(1), 27-47. doi:10.1177/07399 86313510694		these programs, and (3) make recommendations for improving the cultural competence and effectiveness of parenting education programs for Latino families with young children.		competence is a process that evolves over time; (3) connect with local Latino communities and stakeholders as it is imperative to program cultural competence; (4) ensure that the diverse voices of constituents, including Latinos, are heard throughout all phases of development, implementation, and evaluation of parenting programs for Latino families; (5) go beyond translation of materials and consider cultural values, beliefs, and experiences to move toward cultural competence; and, (6) offer ongoing training and mentoring to program staff.
Parenting Curricula Adaptation Attempts for Cultural Sensitivity	**Study Design Evidence Rating**	**Research Questions/Hypothesis**	**Method**	**Results**
Agrazzi, H., Salina, A., Williams, J., Chiriboga,	Pilot Study	What adaptations are necessary to the HOT	Qualitative data collection through field	Based on teacher observations, field

D., Ortiz, C., & Armstrong, K. (2010). Adaptation of a behavioral parent-training curriculum for Hispanic caregivers: HOT DOCS Español. *Infant Mental Health Journal, 31*(2), 182-200. doi: 10.1111/j.1741-3737.2008.00580.x	Using Mixed Methods	DOCS parenting curriculum for effective application with the Hispanic population?	notes regarding (a) response to terminology and words not used by the culture, (b) reactions to content, (c) cultural values and beliefs in parenting expressed during treatment, (d) responses to specific case examples, and (e) response to authority.	notes, and measurement findings curriculum adaptation included; (a) an increase from 6 to 7 lessons, (b) language was simplified and adjusted for understanding and use, and (c) cultural adaptations related to time flexibility, and (d) cultural beliefs of close interactions (personalismo) and family (familismo).
Devall, E. L. (2004). Positive parenting for high risk families. Journal of Family & Consumer Sciences, 96(4), 22-28. http://www.aafcs.org/resources/jfcs.htm	Pilot	Adaptation of the Nurturing Parenting Program with the Mexican American population	Mexican American mother-infant/toddler dyads Implementation of the Nurturing Parenting Program over 24 weeks with a once per week dose lasting 1 hour. Adaptation not described other than the translation into Spanish	Parents showed significant increases in empathy and knowledge of positive discipline techniques, and significant decreases in parent-child role reversals, inappropriate expectations, belief in corporal punishment, and oppression of children's independence following the learning experiences.
Domenech-Rodriguez, M. M., Baumann, A. A., & Schwartz, A. L. (2011).	Pilot Study Using Mixed Methods	What adaptations are necessary to the Parenting Management Training –	The first phase of the adaptation involved four steps: 1)	Results of the first phase guided adaptation through the second

| Cultural adaptation of an evidenced based intervention from theory to practice in a Latino/a community context. *American Journal of Community Psychology, 47,* 170-186. doi:10.1007/s10464-010-9371-4 | | Oregon Model for application with the Latino/a population? | collaboration between the treatment developer and the cultural adaptation specialist, 2) examination of fit of the intervention with the literature, 3) meeting with community stakeholders to identify needs and 4) a needs assessment and gathering of information for adaptations. During the first phase, ten focus groups were held with parents ($N = 40$) to determine parenting goals and barriers. | phase of the study. The curriculum's name was changed to reflect the culture - Criando con Amor: Promoviendo Armonia y Superacion (CAPAS). During the third phase, the CAPAS curriculum was applied with families ($N = 85$) and further adapted based on responses. The application of the CAPAS was delivered in a group format, once a week over eight weeks. Outcomes of the CAPAS resulted in parent satisfaction, positive changes in parenting practices, and retention in the program. |

Dumas, J. E., Arriaga, X., Begle, A. M., & Longoria, Z.N. (2010). "When will your program be available in Spanish?" Adapting an early parenting intervention for Latino families. *Cognitive and Behavioral Practice,* 17, 176-187/	Curriculum adaptation of the Raising Our Children for Success Program Latino families	Parents would attend regularly, report satisfaction with the content and improvement of their children's behavior and their parenting practices.	Conducted focus groups with Latino families to isolate specific cultural issues that the Raising Our Children for Success Program curriculum did not address.	The focus groups resulted in the isolation of specific cultural issues that the curriculum did not reflect: (a) Mexican immigrant mothers are more likely to use physical affection over verbal praise or tangible rewards (b) physical punishment such as spankings is acceptable in the Mexican culture but not in the European American culture, (c) Mexican immigrant families tend to not set up family routines for reading, playing with their child, and bedtime, (d) recognition of the barriers that Mexican immigrant families face.

Dumas, J. E, Arriaga, X. B. Begle, A. M. & Longoria, Z. N. (2011). Child and parental outcomes of a group parenting intervention for Latino families: A pilot study of the CANNE program. *Cultural Diversity and Ethnic Minority Psychology, 17*(1), 107-115. doi: 10.1037/a0021972	Curriculum adaptation of the Raising Our Children for Success Program Latino families	Parents would attend regularly, report satisfaction with the content and improvement of their children's behavior and their parenting practices.	Conducted focus groups with Latino families to isolate specific cultural issues that the Raising Our Children for Success Program curriculum did not address.	The focus groups resulted in the isolation of specific cultural issues that the curriculum did not reflect: (a) Mexican immigrant mothers are more likely to use physical affection over verbal praise or tangible rewards (b) physical punishment such as spankings is acceptable in the Mexican culture but not in the European American culture, (c) Mexican immigrant families tend to not set up family routines for reading, playing with their child, and bedtime, (d) recognition of the barriers that Mexican immigrant families face.
Lakes, K. D., Vargas, D., Riggs, M., Schmidt, J., & Baird, M. (2011). Parenting intervention to reduce attention and behavior difficulties in	Validation of the Children's Hospital of Orange County and University of California, Irvine	1. Is the CUIDAR model accessed proportionally by Latino, African American, and European American families in San Bernardino County? 2. Do Latino parents who attend parent training	Parent-child dyads Latino (*n* = 117) European American (*n* = 21), African American (*n* = 28), and other (*n* = 3) Parents were enrolled in the CUIDAR were	Results by the question: 1. Participation rates were high and proportionally easy access than other mental health services.

preschoolers: A CUIDAR evaluation study. *Journal of Child and Family Studies*, *20*, 648-659. doi:10.1007/s10826-010-9440-1	Initiative for the Development of Attention and Readiness (CUIDAR) model	groups provided in Spanish have better attendance than Latino parents who attend parent education groups provided in English? 3. Does the CUIDAR model of providing community-based intervention to self-referred parents serve children who can be categorized as at-risk for emotional and behavioral disorders? 4. Do the children of parents who complete the CUIDAR model report improvements in their behavior and parent-reported child problems? and 5. Are parents who attend the CUIDAR model satisfied with services and child and family outcomes?	asked to complete questionnaires to answer the research questions: Strengths and Difficulties Questionnaire administered during the first group session and after completion of the CUIDAR at 10 weeks. Parent Satisfaction Questionnaire after the completion of the CUIDAR at 10 weeks.	2. Latino parents who attended in their preferred Spanish language CUIDAR participated more often that Latino parents in the English CUIDAR. 3. The CUIDAR model effectively enrolled self-referred parents of children at risk 4. Child difficulty was measured lower after the completion of the CUIDAR. 5. Parents reported high levels of satisfaction with the CUIDAR services and outcomes.
Wagner, M., & Clayton, S. (1999). The Parents as Teachers program (PAT): Results from two demonstrations. *Th*	Review	Review of two randomized controlled trials of the PAT.	(1) the Northern California (Salinas Valley) Parents as Teachers Demonstration, which served primarily Latino	Small and inconsistent positive effects regarding parent knowledge, attitudes, and behavior, and no gains in child

			parent-child (ages birth to 6 months)dyads ($N =$ 497) in the Salinas Valley of California's Monterey County; and (2) the Teen Parents as Teachers Demonstration, which served adolescent parent-child (ages birth to 3 years)dyads ($N =$ 704) in four counties in Southern California.	development or health between the experimental and control groups overall. Latino Spanish speaking families benefitted more than non-Latino English speaking families with significant gains in cognitive, communication, social, and self-help development. Subgroup analyses of the teen PAT indicated that families what received both PAT services and comprehensive case management services to help mothers improve their life benefitted most.
Barriers to Implementing Culturally Sensitive Parenting Curriculum	**Study Design Evidence Rating**	**Research Questions/Hypothesis**	**Method**	**Results**
Barker, C.H., Cook, K.L., & Borrego, J. (2010). Addressing cultural variables in parent training programs with Latino families.	Literature Review	Discussion of parent training programs relevant to the Latino population.	Applied principles of social validity to evaluate parenting programs applied with the Latin American population.	Report on the incorporation of Latino family cultural variables of familismo, personalismo, respeto, machismo, and marianismo into

e Future of Children,9(1), 91-115. doi:10.2307/1602723

Cognitive and Behavioral Practice, 17(2), 157-166. doi.org.ezproxy.lib. uwm.edu/10.1016/j. cbpra.2010.01.002				parenting programs. Assessing acculturation levels and acculturation stress is important to the application of parenting programs.
Ibanez, G. L., Dillon, F., Sanchez, M., De La Rosa, M. Tan, L., & Villar, M. E. (2015). Changes in family cohesion and acculturative stress among recent Latino immigrants. *Journal of Ethnic & Cultural Diversity in Social Work, 24*(3), 219-234. http://dx.doi.org/10. 1080/15313204.201 4.991979	Longitudinal	What are sociodemographic variables related to change in family cohesion? How is acculturative stress related to change in family cohesion controlling for sociodemographic variables? The more acculturative stress reported the more family cohesion decreases, and family cohesion will continue to decrease across time more for those who report higher acculturative stress than those who do not.	Cuban descent at 42% ($n = 201$), followed by Colombians (19%; $n = 91$), Hondurans (12%; $N = 56$), and Nicaraguans (9%; $n = 43$). Guatemalans, Venezuelans, and Peruvians each represented between 2% and 4%. Bolivians, Uruguayans, Argentines, Chileans, Costa Ricans, Dominicans, Ecuadorians, Salvadorians, Mexicans, and Panamanians, each represented less than 2%.	Familismo decreased over time in relation to increased acculturation to the United States. High levels of acculturation stress increased family cohesiveness.

Karoly, L. A., & Gonzalez, G. C. (2011). Early care and education for children in migrant families. *The Future of Our Children, 21*(1), 71-101. Retrieved from https://www.princeton.edu/futureofchildren/publications/docs/21_01_04.pdf	Literature Review	Do immigrant children benefit from Early Care and Education programs (ECE) that promote healthy development before children enter school and in shaping their success once they begin school?	The scope of the literature review covers childcare and early-learning programs in home- and center-based settings that serve children from birth to their entry into kindergarten. Analysis of 2005 National Household Education Survey for children Early Childhood Program Participation and 2007 RAND California Preschool Study.	The assessment of the barriers to higher participation of immigrant children in high-quality ECE programs indicates that a number of obstacles represent unique issues faced by immigrants such as legal status, language barriers, cultural sensitivities, informational gaps, and perceptions about government services or the importance of early-learning programs
Morelen, D., & Thomassin, K. (2013). Emotion socialization and ethnicity: An examination of practices and outcomes in African American, Asian American and Latin American families. *Yale Journal of Biology and Medicine, 86*(2), 168-178. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PM	Literature Review	Used a socio-cultural perspective to review research that examined emotion socialization (family climate and maternal emotion parenting behaviors specifically) in ethnically diverse groups	Studies (N = 34) were reviewed with research that included European American, Asian American, and Latin American families.	Studies applied measures that were normed with European Americans and did not check for psychometric variance within ethnic groups. Themes that emerged: 1. Latin and Asian Americans value collectivism over individualism while European and African American families value

C3670437/pdf/yjbm_86_2_168.pdf				individualism over collectivism. 2. Power differentials in families identified: Asian, African, and Latin American families as authoritarian with the male as the head. Children are socialized to obey and respect authority. European Americans value individualism and negotiation/ autonomy. 3. Latin American families demonstrate more warmth and harmony toward children than the other ethnic groups.
Wolf, M. M. (1978). Social validity: The case for subjective measurement or How applied behavior analysis is finding its', heart. *Journal of Applied Behavior Analysis, 11*(2), 203-214.	Expert Discussion	The focus of the discussion is to define social validity (subjective measurement) and differentiate social validity from the objective measurement.	Collaboration with the community to determine the importance of research methods and topics.	The social significance of the goals. 1. Are the specific behavioral goals really what society wants? 2. The social appropriateness of the procedures. Do the ends justify the means? That is, do the participants,

Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1311293/pdf/jaba00109-0003.pdf				caregivers and other consumers consider the treatment procedures acceptable? 3. The social importance of the effects. Are consumers satisfied with the results? All the results, including any unpredicted ones?

Appendix C

M-BEES Adaptation Focus Group Questions

1.   Describe your thoughts on utilizing the M-BEES curriculum with your families.
2.   Do you believe that the M- BEES curriculum is an intervention that will be understood and used by your families – provide an explanation.
3.   Describe the obstacles that might prevent the use of the M-BEES curriculum by your families.
4.   Discuss changes you would make to the M-BEES curriculum to improve application with your families.

Appendix D

M-BEES Questionnaire

To help in making changes (if needed) to the Mexican Building Early Emotional Skills handouts

and worksheets you are being asked to answer the following questions.

	Disagree *Explain reason*	Agree
1. I was able to read the parent handouts and worksheets		
2. I was able to understand the parent handouts and worksheets		
3. I found the parent handouts and worksheets interesting		
4. The activities are fun		
5. I would do the activities with my child		

Appendix D continued in M Spanish

Mexicano-edificio tempranas habilidades sociales emocionales viabilidad cuestionario Se les ha pedido a contestar las siguientes preguntas para ayudar a realizar cambios (si es necesario) a los folletos mexicanos edificio tempranas habilidades emocionales y hojas de cálculo.

	Estoy de acuerdo *Explicar la razón*	Estoy de acuerdo
1. era capaz de leer los padres folletos y hojas de trabajo		
2. era capaz de entender los apoyos para los padres y las hojas de cálculo		
3. interesante el padre folletos y hojas de trabajo		
4. las actividades son divertidas		
5. hacer las actividades con mi hijo		

Appendix E Implementation Log

Activity Implementation Log (for each activity)

Handout and Worksheet Title	
Time taken to read & Explain	
Total Time Spent	
Activity Response by Mother	
Activity Response by Child	
Mother's Accurate Application of the Activity	
Mother's completion of the Activity	
Child's completion of the Activity	
EHS home visitor's comments	

CURRICULUM VITAE

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Ealy, P.J., Chasek, C., & Jackson, C. M. (2016). *The effectiveness of mental health simulation-
based training with graduate psychology students and nursing students to increase
understanding of mental health.* Presentation at the American Psychiatric Nurses
Association National Convention. Hartford, CT, October 20-22

Jackson, C. M., Ealy, P. J., & Chasek, C. (2017) *A study in interprofessional mental-health
training: learning the nursing process with counseling students as standardized patients*.
Presentation at the IMSH 2017 Conference. Orlando, FL, January 28-Feb.1

Chasek, C., Ealy, P. J., Mims, G., Dillard, J. & Jackson C.M. (2017) Interprofessional
Simulation: Preparing Counselors for Integrated Primary Care. Presentation at the ACA
2017 Conference & Expo. San Francisco, CA, March 16-19