

6-25-2022

The Impact of a Pilot Virtual Synchronous Group-Based E³ Parent Education: A Qualitative Study

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**The Impact of a Pilot Virtual Synchronous Group-Based E³ Parent Education:
A Qualitative Study**

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Master of Arts in Educational Leadership

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June 25, 2022

DEDICATION

To my parents,

ShuFang and DianMo,

whose love has never departed me.

My heart forever aches, yet is fulfilled.

For though our bodies do not,

our love endures.

ACKNOWLEDGMENT

This work was born out of the tremendous support from many people. Even though it is impossible to thank everyone individually, I have to single out a few here.

First and foremost, I thank the eight participants who generously shared their stories and perspectives as an extensive raw database for my research. Witnessing their enormous effort to learn, driven by parental love, made my devotion to parent education meaningful.

I want to express my heartfelt gratitude to the extraordinary CSP leaders and educators. My thesis advisor, Dr. Oluwatoyin Akinde Fakuajo, her professionalism and encouragement strengthened me to proceed forward. My best writing mentor, Joel Bisser, has walked me through all the baby steps of my growth in academic writing since 2018. Dr. Ric Dressen helped me define and follow my mission of serving parents and families. Professor Dorothy Bialke spent significant time reviewing my paper. The ongoing unconditional support from Dr. Sally Baas and Dr. Sue Starks enabled me to complete the final steps in this journey.

I was extremely fortunate to have consultations with two field experts: Dr. Betty Cooke, an early leader of Early Childhood Family Education (ECFE) in Minnesota, a former faculty member, and a developer for the parent educator online licensure program at the University of Minnesota. Dr. Brianna Ruth, a professor and specialist of Montana State University Extension Family and Consumer Science. Their invaluable input was the source of my inspiration.

Immense gratitude goes to my colleagues and mentors, Dr. Harriet Heath and Jill Griffin; their expertise, experience, and teamwork are the backbone of the E³ Parent Education program.

Lastly, and affectionately, deep appreciation for my life supporter, Craig Baugh, who loyally and patiently held my hand and went through those stressful days and sleepless nights with me. Without him, I have no ground to stand upon.

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ABSTRACT

This study evaluated the accessibility and effectiveness of a pilot virtual synchronous group-based E³ Parent Education (E³PE) program initiated in Whitefish, Montana, in January 2021. It is a qualitative study of a model designed initially for a virtual live group-learning setting to empower parents in building *a nourishing family environment*. Parent education has been proven as an effective intervention and prevention of Adverse Childhood Experiences (ACEs) and K-12 student mental health problems and behavioral issues. However, a lack of universal access and the busyness of parents are significant barriers to participation. The Literature Review showed rapid growth in technology use to increase accessibility, but virtual live parent education was understudied. This study aimed to fill this gap and bridge research-to-practice. Through in-depth one-on-one interviews with eight participants (n=8) who attended eight to 27 E³PE sessions, five major themes were identified: *motivation, impact, challenges, strengths and limitations, and suggestions for improvement*. Findings demonstrated that a free virtual synchronous format provided equitable access and lowered the barriers to participation. Parents reported immediate benefits, increased self-care and self-love, improved parenting capacity and confidence, and feeling supported. The impact on parents led to tangible positive outcomes in children, including better attitude, improved behavior, and increased abilities. Also, it resulted in improved spousal relationships, which ultimately fostered *a nourishing family environment*. Referred to the Early Childhood Family Education (ECFE), this ECFE-like model tailored courses to meet the needs of the families and provided ongoing support to cope with relapses. Finally, the study contributed organic data and meaningful information to the field; findings from the study advised that policymakers promote the E³PE model to support parents and break the negative cycle of ACEs.

Keywords: parent education, synchronous, ECFE-like, nourishing family environment

CHAPTER ONE: INTRODUCTION

Children’s healthy development, school success, and well-being are inseparable from parenting and the family environment. As Biglan et al. (2012) reported, “If we want to prevent multiple problems and increase the prevalence of young people who develop successfully, we must increase the prevalence of *nurturing environments*” (p. 2). *It takes a village to raise a child*. On the one hand, parents and primary caregivers are the first and foremost essential teachers and role models for their children. They are carrying out a significant responsibility of building a *nourishing environment* to minimize toxic events and promote their children’s biological, emotional, cognitive, behavioral, and psychological development. On the other hand, society needs to provide sufficient social support for the families to build a *nourishing environment*, specifically, to develop programs that can empower the parents with self-efficacy and improve parenting capacities (Viola et al., 2020).

The American Academy of Pediatrics (AAP) stated that *safe, stable, and nurturing relationships* (SSNRs) buffer not only Adverse Childhood Experiences (ACEs) and build resilience in childhood experience but also foster adaptive skills to cope with future adversity. AAP strongly advocates for universal parent education as prevention and intervention through partnership across sectors, including education, public health, pediatrics and hospitals, and community services (Garner &Yogman, 2021). Identically, the United Nations International Children’s Emergency Fund (UNICEF) is calling for national governments to provide universal parent support at the population level, not only to prevent the costly and lifelong impacts of ACEs but also to “buffer the effects of community violence and other negative influence” (UNICEF, 2022, p. 2). Building a parent education and family support system integrating services from multiple sectors in the United States depends on the policymakers and leaders who

prioritize the well-being of America's new generation and a *nourishing environment* of society. Meanwhile, decision-makers need professional evidence to inform the policymaking process.

Statement of The Problem

The United States' crisis of Adverse Childhood Experiences (ACEs) and student mental health issues has been worsened by COVID-19. A massive number of families with school-aged children became the most vulnerable population due to chronic stresses related to COVID-19, including social isolation, distance learning, and resuming to in-person classrooms; the mental health of both the children and the parents showed a significant decline (Davis et al., 2020). Pre-Covid statistics indicated that up to 20 percent of U.S. children experience a mental disorder each year (CDC, 2021), and 67% of American adults suffer the lasting negative effect of ACEs on their health and well-being (Harris, 2013). Student mental or behavioral disorders are often linked to abusive childhood experiences, drug or alcohol use by the parents, family conflicts, gene disorders, and poverty (MedlinePlus, 2021). The rapidly increasing student mental health problem could lead to technology addiction, alcohol and substance use disorders, and suicide (Pincus et al., 2020). Classroom disruptions and severe rule violations as part of the symptoms of student behavioral disorders directly impair the safety of the school environment. Student counseling and psychological therapy are too costly for many American schools (Weir, 2020). Multiple studies suggest parenting training/education is a more effective intervention for student outcomes than child therapy approaches, especially among low-income, ethnic minority urban schools (Acuña & Martinez, 2018; Gonzalez & Villalba, 2017; Viola et al., 2020).

Parenting education has been shown to be effective in combating mental/behavioral disorders and promoting parenting efficiency throughout the world (Bennet et al., 2013; Buchanan-Pascall et al., 2017; Furlong et al., 2012; Harrison & Vliet, 2017; Karjalainen et al.,

2021; Kjobli et al., 2013; Russo et al., 2021; Stewart-Brown et al., 2003; Zubrick et al., 2005). However, participation and retention rates remain a significant challenge for in-person parent education classes, especially for families with school-aged children, because these parents often work full time (Bearss et al., 2017; Fleming et al., 2015; Gershy & Omer, 2017). Moreover, the lack of policy support and minimal financial resource are two limits to in-person parent education programs in American communities (Clarkson, 2014). Many programs could not provide ongoing support to families and struggled with outreach due to a shortage of funding.

Fortunately, increasing technology usage provides an opportunity for virtual synchronous parent education that may provide live learning and sharing experience and be cost-efficient and convenient for parents, whether working or at home. However, recent research misses sufficient evidence for the impact of virtual group-based parent education as a prevention strategy, especially in the United States. Additionally, some professional parent educators at Early Childhood Family Education (ECFE) who had to teach distance learning in 2020 due to COVID-19 argued that it could be challenging to maintain group engagement and build a sense of connected community through a virtual format. It is essential to gather organic data and meaningful information from the frontline to support the field practice.

Purpose of The Study

The primary purpose of the study is to evaluate the impact of a virtual synchronous group-based, ECFE-like parent education program as a preventive strategy to strengthen parents' competence in building a *nourishing family environment* for the successful development of the children and the well-being of the whole family.

ECFE is a unique statewide program in Minnesota established over 45 years ago and delivered through the public school system (MNAFEE, 2015). A pilot virtual synchronous

ECFE-like program, Parenting Toolbox Program (PTP), was initiated in the Whitefish School District, Montana, in January 2021. The design of PTP referred to the ECCE Core Curriculum Framework for the lesson plans and adjusted to fit the local community's culture and the families' needs in the classes. Contrary to the families' eligibility to participate in ECCE, PTP expanded the service to support families with school-aged children.

Later in November 2021, PTP was updated and changed the title to E³ Parent Education (E³PE). E³ stands for *Extending, Enabling, and Enlightening*, the three phases of curriculum design. *Extending* focuses on parent development and parents' self-efficacy (extend the self) to build a solid foundation for further learning and implementation. *Enabling* adapts the "Creative Parenting" curriculum developed by Harriet Heath, a licensed psychologist and a pioneer practitioner in parent and family education, to enable the parents with knowledge and abilities to guide children with their family values. *Enlightening* empowers parents with great practical tools and strategies for implementation while providing group support to overcome challenges in daily practice. By the time the interviews with the participants of this study were conducted, the group learning was toward completing the first phase— *Extending*. The new program title E³PE will be used in the context of the following chapters of this study.

The six parents and two grandparents who participated in the study had attended eight to 27 classes by the time of the interviews. This research aims to evaluate the impact of the pilot E³PE program by understanding the participants' stories and processes regarding the changes and challenges after/during the parent education classes and the participants' perceived strengths and limitations of the program.

The Research Questions

In light of what is known about andragogy in the contemporary educational setting, how shall parent and family educators lead equitably and inclusively to promote family development and learning effectively? To evaluate the impact of a pilot virtual synchronous E³PE program that provided equal and free access to all eligible families, this study seeks to address the following two questions:

1. What is the impact of the virtual group-based parent education on the participants in terms of strengthening their ability to build a *nourishing environment* for their children's development and learning?
2. What are the strengths and limitations of this virtual program, and how to improve it?

Significance of The Study

The first significance of this study is to seek evidence for the effectiveness and feasibility of virtual parent education in preventing student mental health and behavioral problems. The suicide rate in Montana is listed as number one in the United States, and up to 40% of high school students seriously attempted suicide in communities like Big Timber (PBS NewsHour, 2020). This urgent situation calls for immediate action to develop practical programs to support families with school-aged children. A thorough evaluation of the impact of E³PE will provide valuable data for practitioners, educational leaders, and policymakers regarding whether virtual synchronous parent education could be an additional option to address the situation. Once proven effective in increasing resource accessibility and promoting a *nourishing family environment*, E³PE could be replicated in other districts and communities in Montana to prevent adverse childhood experiences (ACEs) and promote desirable outcomes in children and their families' well-being.

The second significance of the study is to fill a gap in research on this topic. Walker et al. (2012) and MNAFEE (2015) reported remarkable positive outcomes of ECFE, though these results are limited to families with children from birth to age five. The literature review showed numerous research in foreign countries about parenting training for families with school-aged children, but few were conducted in America. Studies on virtual synchronous parent education as a prevention strategy were rarely found. Even though many in-person programs were rapidly adapted to distant learning due to COVID-19, the published studies and findings are not readily available. This research may contribute to the field by providing evidence and information about the impact of a virtual synchronous group-based, ECFE-like parent education program.

Delimitations and Scope of The Research

A nourishing environment incubates children's healthy development and successful learning. The essential parts of a *nourishing environment* include family, school, community, and an online social environment in which the children are involved. There are important elements that influence each of these essential parts; for example, teachers' pedagogy, district policy, and effective leadership in the system can all impact the school environment. Similarly, a family's social-economic status, family members' physical and mental health, and in particular, parents' self-efficacy and parenting skills are vital factors that contribute to a family environment. This research focuses on promoting a *nourishing environment* in families through parent education.

The scope of the research is specifically focused on the outcomes of a virtual synchronous group-based PTP/E³PE program that was initially provided through Community Education of the Whitefish School District in Montana. The program adopted the ECFE model with adjustments to serve families from birth to school-aged children. The weekly parenting

classes were conducted in a virtual synchronous format through Zoom or Google Conference meetings. The similarities and differences between ECFE and PTP are displayed in Appendix B.

Definition of Terms

In this study, “Parent” is an inclusive concept/term that represents a role for any primary child-caregivers, for example, parents, stepparents, grandparents, foster parents, legal guardians, close family members and friends, and even babysitters who take an essential part in caring for a child. This concept is embedded in all parts of this research, including the literature review, methodology, data analysis and results, and discussion chapters. It is imperative to interpret each of the following definitions with an understanding of this concept.

Adverse Childhood Experiences (ACEs) are defined by the CDC as potentially traumatic events that occur in childhood (0-17 years). Examples include but are not limited to experiencing or witnessing violence, abuse, neglect, and/or living in an environment that undermines a sense of safety, stability, and bonding. “ACEs can have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity” (CDC, 2022).

Andragogy is synonymous with Adult Education, which means “The understanding of the science and practice of adult learning” (Graham, 2022, para. 4). This term was initially coined by German educator Alexander Kapp in 1833 and further developed and popularized by American educator Malcolm Knowles in the 1970s (Pappas, 2013). Knowles’s adult learning theory outlined six main assumptions different from teaching children (pedagogy): self-concept, learning from experience, readiness to learn, immediate applications, internally motivated, and needs to know (Bouchrika, 2021). Typically, the learners in parent education classes are adults; therefore, andragogy is one of the essential elements of the competency for parent educators.

A Nourishing Family Environment is a family environment that nurtures the healthy and successful development of individual members in the family (Biglan et al., 2012). A *nourishing family environment* could minimize toxic conditions and promote the well-being of the children, parents, and family members. “If we want to prevent multiple problems and increase the prevalence of young people who develop successfully, we must increase the prevalence of *nurturing environments*” (Biglan et al., 2012, p. 2).

Early Childhood Family Education (ECFE) is a statewide program in Minnesota delivered through the public school system as part of community education. It is available for all families with children from birth to kindergarten enrollment. It recognizes that families provide the child’s first and most important learning environments and that parents are a child’s first and most significant teachers and role models (MDE, 2021).

Parent Education or Parent Training is a class or program designed to help participants improve parenting knowledge and skills, boost parent self-efficacy, enhance positive relationship building among family members, and grow connections to community resources. The training courses, workshops, events, meetings, and counseling are tailored to meet the participants’ cultural backgrounds and family needs (MNAFEE, 2015; NPEN, 2021; NCFR, 2021).

Parent Educators are professionally trained practitioners (e.g., school psychologists, social workers, and school counselors) or licensed educators who are qualified for facilitating/teaching parent education sessions (NCFR, 2021).

Safe Stable Nourishing Relationships (SSNRs) reflect the relational health a child receives from the primary childcare giver(s). In the 2021 updated policy statement, the American Academy of Pediatrics (AAP) specified that early life experiences, both nurturing and adverse,

especially relationship bonds, “are biologically embedded and influence outcomes in health, education, and economic stability across the life span... SSNRs not only buffer childhood adversity when it occurs but also promote the capacities needed to be resilient in the future” (Garner & Yogman, 2021, p. 1).

Virtual Synchronous means online communication “happening or done at the same time or speed” (Cambridge Dictionary, 2022, para. 1). Synchronous learning refers to educational settings wherein a group engages the interactions simultaneously so learners can ask questions and receive answers (Cambridge Dictionary, 2022). Virtual synchronous in this research refers to education/training classes conducted through Internet platforms, such as Zoom, Google Conference, and other distance learning technologies that provide **live** meetings and learning experiences.

Chapter Summary

Considering that what is known about a whole child development relies on a whole family development, it is impressive for educational leaders to develop a universal approach to empower parents/families with adequate strength and self-efficacy to promote a nourishing environment for life’s success for all children.

Through studying the impact of a pilot virtual synchronous group-based parenting program in Whitefish, Montana, this research seeks pathways to the universal accessibility and practicability of parent education as a preventive strategy to eliminate toxic conditions within families and to increase parents’ competence in building a *nourishing family environment*, therefore, contributing meaningful data to professionals and policymakers toward addressing the crisis of AECs, student mental health problems and even the suicide crisis in schools and communities.

In the following sections, Chapter Two includes a literature review that dives into the existing research in the field to gather information as a reference and to inform the study design. Chapter Three explains the methodology, the data collection, and the analysis procedure design. The results of the study will be presented in Chapter Four. The final section, Chapter Five, discusses the findings in conjunction with the research questions and makes recommendations to those working in the field.

CHAPTER TWO: LITERATURE REVIEW

The critical role of parenting and the importance of social support to families with young children have been gaining attention from educators and leaders, schools and communities, and academic institutions and field organizations. Especially during the COVID-19 pandemic, addressing the crisis of K-12 student mental health issues and the chronic toxic stresses on parents/families with school-age children created an urgent call for experts and professionals in the field of multiple sectors, including but not limited to public health services and education (Davis et al., 2020; Goldberg et al., 2021; Pincus et al., 2020; Weir, 2020).

Parent training (PT) has been employed and evaluated as an intervention and prevention for children's mental health and behavior issues at home and in schools throughout the world (Acuña & Martinez, 2018; Bennet et al., 2013; Buchanan-Pascall et al., 2017; Dretzke et al., 2009; Furlong & McGillway, 2015; Giannotta et al., 2013; Hall et al., 2007; Harrison & Vliet, 2013; Karjalainen et al., 2021; Lundahl et al., 2005; Singh et al., 2019; Stewart-Brown et al., 2004; Zubrick et al., 2005). PT was also utilized in foster care with families of children with serious emotional disturbance (SED) to improve caregiver functioning and the children's mental and behavioral health, reducing the length of long-term foster care for these children (Akin et al., 2017).

Moreover, the research discussed multiple barriers to implementation and participation in PT programs. On the one hand, the lack of universal access to high-quality programs is a big problem, particularly in rural low-income areas. On the other hand, it was hard for parents to schedule their time for PT sessions due to their busy life, especially for families with school-age children (Andersson et al., 2019; Behhema et al., 2008; Lau et al., 2011; Viola et al., 2020; Walker et al., 2012). To increase PT accessibility, studies showed the international trend for

technology applications to deliver the content through online platforms such as emails, webpages, video recordings, telephones, and other social media, but most of those methods did not provide live learning experiences (Enebrink et al., 2012; Sanders et al., 2014; Bearss et al., 2017; Clarkson & Zierl, 2018; Kobak et al., 2020). During the last two years, the COVID-19 pandemic caused rapid adaptation from in-person settings to distance/virtual learning through Zoom, Google Conference, and other platforms, wherein the facilitators and participants had live interactions. However, the impact of online and virtual parent education was understudied (Vilches et al., 2021; Walker, S., 2021).

Relevant studies focused on the online/virtual parent learning experience were not readily available at the time of this review. For this reason, two presentations from the field and academic experts are included in this review: one includes the results of a study by Vilches et al. (2021) on the teachers' experience of changing an in-person group-based PT program to live online group learning which was presented at the National Council on Family Relations (NCFR) Annual Conference 2021. The other findings are from a survey of ECFE parent educators conducted by Walker (2021) and presented at the Minnesota Association of Family and Early Education (MNAFEE) Fall Professional Development Training (virtual).

Through diving into the themes/findings of over 30 carefully selected research articles and relevant resources in the field of parent and family education throughout the world, this literature review analyzes the effect of group-based PT intervention and prevention programs, compares the results between in-person and distance-learning groups, and discusses the strengths of a unique ECFE model in Minnesota, USA. Furthermore, additional attention is given to identifying the barriers to participation and retention, especially the increasing trend and investigation in delivering parent education through technology-based platforms.

In-Person Parent Training (PT) as Intervention for Child Behavioral/Mental Issues

In-person PT has been implemented as a *universal approach* to address student mental health and behavioral problems. Fazel et al. (2014) defined, “*Universal approaches* have particular appeal because they are the least intrusive, potentially incur the lowest cost, and therefore have the greatest chance of adoption in the school setting” (p. 7). Research shows enormous evidence for short-term positive student outcomes such as improved parenting skills, closer parent-child relationships, and better mental and behavioral health of the children; even attending one 2-hour training session could bring immediate improvement in student conduct and parenting self-efficacy (Viola et al., 2020). Some scholars went on to study the long-term effectiveness and provided key messages for maintaining the positive outcome after PT intervention (Furlong & McGilloway, 2015).

The Accountability of Short-Term Effects

The short-term effectiveness of PT has been studied with families of children in a broad age range in various cultures and locations (Acuña & Martinez, 2018; Dretzke et al., 2009; Hall et al., 2007; Stewart-Brown et al., 2004). Stewart-Brown et al. (2004) tested a group-based parenting program in the United Kingdom for families with children aged two to eight. They discovered the effectiveness after the intervention and at a 6-month follow-up. Results showed reduced child behavioral problems and mental health benefits for both the child and the parents, increased parent confidence and decreased parent stress, and improved parent-child relationships (Stewart-Brown et al., 2004). A systematic review (Dretzke et al., 2009) of 57 randomized controlled trials (RCT) on group-based PT in the UK concluded that PT programs are effective short-term structured interventions for treating children’s conduct issues. “A consistent trend

across all studies showing a benefit from parenting programs... reported child behavioral outcomes showing statistically significant improvements” (p. 8).

Buchanan-Pascall et al. (2017) conducted a meta-analysis and systematic review among 23 studies between 2006 and 2016 of 21 RCTs: seven conducted in Australia, five in the USA, and four in the UK; others were conducted in Belgium, Hong Kong, Ireland, Norway, the Netherlands, Romania, and Sweden. Each RCT evaluated the outcome of group-based PT intervention for children (4-12 years) with externalizing and/or internalizing problems. Only three studies focused on interventions for parents of children with internalizing problems (emotional, anxiety, or depression); the remaining 19 studies measured PT intervention for children’s externalizing problems (behavior/conduct, oppositional, aggressive, impulsivity, hyperactive, or antisocial). This review provided substantial evidence on the sufficiency of group-based PT intervention to reduce externalizing behaviors in children. The effect on children’s internalizing problems was modest in the only three studies; another 11 studies mentioned: “non-statistically significant improvement in internalizing problems” (Buchanan-Pascall et al., 2017, p. 20). Additional information from this review was that four out of 23 studies described the PT intervention programs that used boost session(s) post-treatment; unfortunately, the analysis did not provide further evidence of the impact of the boost sessions.

PT intervention could be an essential support for low-income minority families who often had less social capital and lacked access to other fees-required services. Acuña and Martinez (2018) conducted quantitative research for a four-year period (2006-2009) to examine the feasibility and effectiveness of a Back to Basic parent education program that teaches participants to change their parenting and their children’s antisocial behavior. The qualified participants (n=131, 97% Latino) have children (aged 4-12) from four elementary schools in a

large Latino urban low-income school district in South Los Angeles, California. The concepts of the study confirmed the *structural family systems theory* (Szapocznik et al., 1989). “It is believed that a change in parent behavior will lead to a change in child behavior” (Acuña & Martinez, 2018, p. 7). This theory provided an invaluable reference and framework for evaluating parent education programs.

Participants attended five to 14 sessions of two-hour weekly group-based classes delivered by school social workers trained by the Back to Basic development team. Content covered various knowledge and skills, for example, rules setting and adequate monitoring, consistent follow-through and guidance on implementation, and connection with teachers. Both Spanish and English were available for the presentation to meet the parents’ needs (Acuña & Martinez, 2018). Pre-test and post-test questionnaires were used to compare the outcomes of their children’s behavior after the sessions. Results confirmed the immediate positive outcome in the children, including a tremendous improvement (effect size 1.12) for the total score of home behavior, social behavior, and academic behavior (Acuña & Martinez, 2018). This finding revealed the effectiveness and the practicability of PT in ethnic minority low-income urban school communities. The intervention is based on a manualized curriculum, facilitating easy and affordable replication for low-income urban schools. The training is available in multiple languages to meet the parents’ needs, and the group-based universal setting freed participants from stigma and opened the door to all families (Acuña & Martinez, 2018).

Similarly, a PT workshop was designed for cultural and linguistically diverse (CLD) families with preschoolers in an urban, generally low-income community in Kansas, USA. The workshop empowered the parents/primary caregivers with child behavior management strategies,

lowered parental stress, and completely stopped or substantially decreased the preschoolers' challenging behavioral problems after the intervention (Hall et al., 2007).

In addition, a recent study conducted by Viola et al. (2020) on a 2-hour PT intervention in a large suburban school district for families with elementary and secondary students diagnosed with Emotional Behavioral Disorder (EBD). Findings right after the intervention and within a one-month follow-up interview discovered that 95% of parents increased strength in helping their children's behavior and school success; meanwhile, parents reported higher perceived parental ability and impact on their children's school performance. As Viola et al. (2020) emphasized, this echoes the results from previous studies: "A single session of parent education can improve parental self-efficacy" (p. 5).

The Challenge to Maintain Long-Term Effects

There is less research done on the long-term effectiveness of PT compared to the immediate outcomes. A meta-analysis evaluated 63 peer-reviewed studies regarding PT programs designed to modify children's behavioral disorders and adjust parental behaviors and perceptions (Lundahl et al., 2005). This analysis called out that only four studies evaluated the long-term impact of non-behavioral (attempts to alter parents' communication patterns and attitudes toward childrearing) PT programs; therefore, "Understanding the durability of effects of the non-behavioral programs was compromised" (Lundahl et al., 2005, p. 13). There were positive signs for the long-term influence on treating a child's antisocial behavior, yet the benefits decreased over time; and a group-based treatment model was less efficient than individually delivered programs to financially disadvantaged families (Lundahl et al., 2005).

To fill the gap in long-term evaluations for group-based parent education as an intervention for a child's behavioral problems, Furlong and McGilloway (2015) conducted

qualitative research to assess the long-term impact of the Incredible Years Parenting Program (IYPP) for families with children aged three to eight. The intervention was applied in five different settings from four disadvantaged urban areas in Dublin, Ireland. Professional IYPP facilitators presented the 14 weekly 2-hour sessions designed to strengthen parenting skills, build a positive relationship with their child through play, praise, and rewards, and manage undesirable behavior through limit-setting strategies (Furlong & McGilloway, 2015). All participants (n=149) had attended at least seven interventions, were randomly assigned into an intervention group (n=103) and a control group (n=46), and followed up with a one-to-one in-depth, open-ended interview of each participant at six months, 12 months, and 18 months post-intervention (Furlong & McGilloway, 2015).

According to Furlong and McGilloway (2015), 60% of the parents at 12 months indicated continued success in managing children's behavior with the strategies learned from the intervention. In contrast, others shared challenges of relinquishing parenting skills in stressful times and cited a lack of social support and negative influences from their children's peers. At 18 months, some parents (75%) reported restoring positive outcomes through seeking support from social networks and IYPP facilitators. This finding provided a potential solution to the situation discussed in the Lundahl et al. (2005) meta-analysis regarding benefits decreasing over time after group-based PT intervention and suggesting that program developers make a relapse-prevention module available. More importantly, continued social and professional support, mainly for the most vulnerable families, are fundamental to the sustainability of the long-term effectiveness.

Similarly, one of the first RCT studies (Karjalainen et al., 2021) among families involved with Child Protection Service (CPS) in Finland evaluated the long-term effects of the IYPP for 78 parents with children (3-7 years old) at one-year follow-up after a 19-week intervention.

Results reflected the need for more support and constant reminders after the intervention to maintain the new parenting practice, coinciding with the discoveries of Furlong and McGilloway (2015). Another notable finding is “It is therefore important to identify all risk factors in the lives of these families and to create a long-term plan with a multidisciplinary team in order to better target services to the needs of the families” (Karjalainen et al., 2021, p 11). The key messages from these three studies indicated that an ongoing service in PT is necessary to maintain long-term positive outcomes.

Parent Training as Prevention to Promote A Nourishing Environment

Prevention of problems is preferred over intervention *after* negative consequences. The literature review shows an increasing awareness of the vital role that Parent Education plays in preventing adverse child outcomes through promoting parenting capacity for building a *nourishing environment* (Bennett et al., 2013; Giannotta et al., 2013; Russo et al., 2020). This section reviews the international trend in preventive PT programs and America’s leading role in the Parent Education field to prevent adverse child outcomes.

International Trend on Preventive Parent Education

Bennet et al. (2013) reviewed 48 RCTs that were conducted from 1950 to 2011 in various countries (USA, Australia, Canada, the UK, China, Germany, Japan, the Netherlands, and New Zealand), with 4,937 participants involved in group-based PT programs toward improving parental psychosocial health. Findings revealed remarkable short-term efficacy in decreasing depression, anxiety, stress, anger, and guilt while increasing parent confidence and satisfaction with their partner relationship. However, Bennet et al. (2013) pointed out that the challenge of maintaining the result was obvious; at a 6-month follow-up, all of the effectiveness was fading except stress and confidence, which were also discontinued by the end of a 1-year period.

A pilot study by Giannotta et al. (2013) examined the feasibility and effectiveness of parent education as a *universal* prevention program for adolescents' conduct problems among 147 pairs of mothers and their 11-14 years old youth. Aiming to find a suitable and sufficient prevention tool for Italian families, this Connect program made necessary adjustments to make it culturally appropriate, for instance, focusing on the practical part of family relationships to match the tradition of strong emotional bonds between family members (Giannotta et al., 2013). This article mentioned a few critical limitations and dynamics when adapting a universal prevention program to a Mediterranean country such as Italy. Recruitment could be challenging due to the perception that seeking help from outside the family network may cause embarrassment or humiliation. However, because of the strong bond and long period that children live with their families, parent education has the potential to be more influential on children's behavior. Moreover, most existing parenting programs target youth with problems or "high risk." However, very few are *universal* programs that serve families with children who behave normally to prevent problems (Giannotta et al., 2013).

A recent assessment of a brief parenting training for families with school-aged children in Sao Paulo, Brazil, discussed a similar situation about the lack of preventive parenting programs, specifically, the inaccessibility of these programs to low-income Brazilian populations (Russo et al., 2020). The PROPAIS program "Provides basic guidelines for developing adequate educational practices and protective family interaction" (Russo et al., 2020, p. 2). It was designed as brief six, one-hour group sessions to make it an affordable solution for the considerable needs in communities with high social and economic vulnerabilities. Analogous to the Connect program implemented in Italy, PROPAIS encountered difficulty with attendance, wherein 20 out of 45 parents declined to attend after the first session without the willingness to share reasons.

Russo et al. (2020) reflected, “Low parental involvement may be due to excessive work, lack of time, and a shortage of events that include families in institutions, making it difficult for them to appropriate a space that they only recognize as a place for children” (p. 8).

Research from Harrison and Vliet (2013), Singh et al. (2019), and Zubrick et al. (2005) indicated that both federal and state governments in Australia had initiated progressive policy and funds supporting relevant research and the development of PT programs. Triple P (Positive Parenting Program) as a preventive program for parents with preschool-aged children was delivered as a *universally* accessible application that reached about 66% of eligible families within a metropolitan region in Australia. This largest up-to-date evaluation of Triple P included an experimental group of 804 participants and a control group of 806 parents (Zubrick et al., 2005). The immediate outcome demonstrated an astonishing reduction of dysfunctional parenting and childrearing conflicts (total score 0.62); for example, the parental stress and depression reduction scores were more than double compared to the control group.

Furthermore, results at the 1-year and 2-year follow-ups were not as large but still significant (total score 0.34); improvement in family mental health and marital adjustment contributed to the significant diminishment in their children’s behavior problems (Zubrick et al., 2005). This result suggested that a carefully monitored, measured, and delivered program could be a powerful tool to prevent behavioral issues in children (Zubrick et al., 2005). Additionally, home visits with some targeted families prior to group education could be a strategy to promote engagement and commitment. More importantly, Zubrick et al. (2005) called out, “Identifying other appropriate services for families not able to complete this program is a critical follow-up step” (p. 15). The information from this study demonstrated the accountability of a preventive PT program and suggested networking with alternative services for families in need.

Learning Together (Harrison & Vliet, 2013) is an innovative project in response to local contextual factors in metropolitan Sydney, Australia, especially parents' needs and expectations about their children's education. The project emphasizes building common understandings between parents, teachers, and academics in the field; specifically, it is focused on addressing the "know-do gap" between knowledge from research and the realities of practices in parent education. Even though this pilot project was delivered in two sites only in Sydney, the outcomes indicated that "... Children benefit when parents are informed, and when they feel supported, efficacious and less stressed" (Harrison & Vliet, 2013, p. 12). The result proved the efficiency of the Learning Together model because it "... provides a forum for parents and teachers to learn together scaffold by university academics" (Harrison & Vliet, 2013, p13).

Moreover, Singh et al. (2019) studied a school-based Resilient Families program to identify specific factors contributing to reducing depressive symptoms by increasing social-emotional skills. There were 23 secondary schools in Melbourne, Australia, included in this study, which involved 1,826 grade 7-9 students who had completed the curricula and surveys. Surprisingly, a two-year follow-up with the students demonstrated that it was the parent education sessions, a small portion of the program, instead of the 12-week teacher-led student learning classes that were initially designed as the main context, became the primary influence for preventing adolescent depression (Singh et al., 2019). This discovery proves the powerful position of parent education in promoting student mental health.

Prevention in The United States

The United States is recognized to be in an advanced position in parent education (Giannotta et al., 2013; Russo et al., 2020) mainly because of several American-created parenting programs (such as Incredible Years and Parenting Management Training Oregon).

Several programs have been popularly adopted and studied internationally as effective interventions for child behavioral problems (Bekkema et al., 2008; Furlong & McGilloway, 2015; Akin et al., 2017; Karjalainen et al., 2021). Some newly developed preventive programs, such as Attachment Vitamins (AV) and the Parent college Planning Program (PPP), also contribute to the enrichment of the domestic system (Gonzalez & Willaba, 2018; Waters et al., 2020).

Attachment Vitamins (AV) is a prevention program that addresses the gap for universal trauma-informed prevention to complement clinical intervention for parents who have experienced toxic stress and trauma, which in turn have the potential to pass these adverse experiences to their children (Waters et al., 2020). A pilot study in Washington state included 52 parents who participated in 10 weekly 90-minute AV meetings led by two trained facilitators and discovered a statistically significant increase in parents' sense of competence and emotional regulation skills. However, results did not find the anticipated decrease in parenting stress and parental negativity toward the child, so this will require further study with a larger sample (Waters et al., 2020).

Another example is the Parent college Planning Program (PPP), a Latino parent-focused, Spanish-language, eight-week psychoeducational group program that is designed to enable Latino immigrant parents to guide their children toward postsecondary education success. Gonzalez and Villalba (2018) evaluated the feasibility and efficacy after this program was applied to six sites in a community with a steadily growing Latino population in the rural southeast of USA. This study comprised 60 participants who completed the entire eight sessions, plus 33 who attended some program sessions. Most families were Mexican in origin and had been living in the U.S. for an average of 17.3 years; the average age of the participants was 39.8,

and 90% of them were female; recruitment required effort, and the program provided free attendance, childcare, and snacks (Gonzalez & Villalba, 2018).

Both quantitative and qualitative data indicated a consistent increase in the participants' college knowledge and self-efficacy and better parent-child engagement. They suggested PPP as "... an important mechanism for empowering immigrant parents to provide both emotional and instrumental support for their children's educational planning success" (Gonzalez & Villalba, 2018, p.15). In addition, the PPP members reflected that the group setting was comfortable and allowed them to interact with other peer parents from similar backgrounds, thus building connections, reducing isolation, and allowing for a safe environment where parents could ask questions without feeling shame or embarrassment (Gonzalez & Villalba, 2018).

To sum up, the evaluation of this study added evidence to the discoveries from the study of the AV program. It is imperative to meet the needs of the local families, including the parents' individual life experiences (especially for those who had ACEs or trauma) and the families' cultural backgrounds. Tailoring the parent education program to meet the needs of the local community/families is one of the significant characteristics of a universal prevention program in Minnesota, which will be discussed in the next section.

The Strengths of ECFE MN as A Model for Parent Education

Early Childhood Family Education (ECFE) was a low-cost, low-dose (weekly classes), high-effect statewide program that is unique in Minnesota and has been established in the public school system since 1974 (MNAFEE, 2015). It was a two-generational program (parents and children) designed to carry out the following mission: "To strengthen families through education and support of all parents through providing the best possible environment for the healthy growth and development of their children" (SPPS, 2021).

ECFE in each district is tailored to meet community characteristics and the specific needs of local families; all programs comprise three parts: parent education, child education, and parent-child interaction (MNAFEE, 2015). Classes are designed and facilitated by state-licensed parent educators and early childhood teachers to ensure high quality in delivering the attributes, including child-focused, family-focused, and parent-child interaction components (Mueller, 1996). Three indicators reflected the strengths of ECFE: Annual return on investment (ROI), expanding *universal access*, and proven significant effectiveness.

Massive Return on Investment (ROI) Saves Tax Money

A group-based design makes ECFE cost-efficient in the prevention of adverse child outcomes. Parenting and family environment are directly and indirectly related to adverse childhood experiences (ACEs) and children's mental health disorders. "ACEs are costly," as the Centers for Disease Control and Prevention (CDC) (2021) indicated that "The economic and social costs to families, communities, and society totals hundreds of billions of dollars each year... and an estimated \$247 billion is spent each year on childhood mental disorders. Finding a solution is an urgent call to the nation's educational leaders, and policymakers, particularly to the leaders of Montana, a state wherein the mental health problem and the suicide rate is listed at the top of the nation (PBS NewsHour, 2020).

Comparatively, the cost of preventing ACEs and addressing student mental health issues through a family education program is much lower. Referring to the effective ECFE in Minnesota, the current revenue each school district gets is \$151.04 per child birth-4 years old by the census (MED, 2021), plus local dollars like the public referendum in the St. Paul district is \$1.25-1.5 million per year (about half of ECFE revenue) (SPPS, 2021). Applying this formula to the total 73 million U.S. children under 18, the total expense could be $\$151 \times 73\text{million} \times 1.5 =$

\$16.5 billion. In contrast to \$247 billion spent on childhood mental disorders alone, the ROI of a proactive FPFE program could save \$230.5 billion in tax dollars annually.

Universal Access and Ongoing Support

The utilization of universal access and providing ongoing social and professional support to the families is an essential part of ECFE culture. “ECFE practice emphasizes the importance of families and communities working together to support the healthy development of children... It is offered through Community Education in 360 school districts and the four tribal schools” for all families with children from birth to kindergarten (Mueller, 1996, p.15). This design allows lasting effectiveness when families could continue the ongoing education for up to five years with one child and possibly remain in the program for eight or even ten years if they have multiple children. In an official report of ECFE Saint Paul, one of the biggest public-school districts in Minnesota, the parents stated that ECFE is indispensable for the healthy development of their children and their families (Walker et al., 2013). The state aid and local levies funded the program and reinforced legal interpretation and protection with a primary purpose “to provide parenting education to support children's learning and development” (Minnesota Statutes 124D.13, Subdivision 1, 2011). In fact, “ECFE is one of the only *universal access* family education and support programs in the United States” (Walker et al., 2013, p. 4).

More than 260,000 young children and their parents attended ECFE during the school year of 1994-1995, which was close to the numbers of participants in 2013-2014 (111, 384 parents and 107, 570 children) (MNAFEE, 2015); in some districts, “lower-income families represented 36 percent of all ECFE participants in 1994 and 58 percent of new enrollees” (Mueller, 1996, p.13). Mueller’s study (1996) recommended that ECFE is a *universal access* program with demonstrated effectiveness for all families with different characteristics from

diverse demographic backgrounds and suggested that policymakers expend funds for the ECFE program in order to extend the service to more populations (40% of eligible families participated ECFE in 1996) and to continue the service through elementary school to support a whole family development further.

Proven Effectiveness

Mueller (1996) spent two and a half years working with a team consisting of 60 professionals, including 28 ECFE staff, to evaluate outcomes with the 700 low-income families who participated in ECFE in the 1994-1995 school year from 14 school districts in Minnesota. Quantitative data showed that 92% of low-income parents reported “positive difference in their awareness and understanding of children and child development, in their confidence as a parent, and feeling of social support. Seventy-two percent reported improvement in how they relate to their child” (Mueller, 1996, p 8). This result is consistent with systematic staff assessment of parent outcomes. Furthermore, significant improvements found in children’s behavior include independence (72% compared to 59% in a non-study group), language/communication skills (68% compared to 56%), and relationship with peers (62% compared to 46% in the non-study group) (Mueller, 1996).

A quantitative and qualitative report by Walker et al. (2012) evaluated the effectiveness of ECFE in one of the state’s largest school districts, Saint Paul. It included a field-tested survey for high reliability before administering to 1,128 participants in 98 classes in the spring of 2012, including 14 sites throughout the school district. Researchers received 1,098 (97%) responses from parents/families with multiple variables in child ages, length of participation, family income, education, ethnicity, and primary languages at home (Walker et al., 2013). Upon participating in one or more semesters of weekly family education classes, nearly all (94%)

parents reported significant positive outcomes in multiple areas, including their child's behavior changes, especially social-emotional and problem-solving skills. Furthermore, improvement among families from lower social and economic status (SES) was more significant than average. Walker et al. (2013) indicated that parents reported remarkable changes in their child's communication skills (effect size 0.99), social skills (effect size 0.91), and problem-solving (effect size 0.90).

There was a limitation to this research with the absence of a control group. Even though the report was not published in a peer-reviewed journal, the expertise of each individual in the research team secured the quality of the process. Nevertheless, this study demonstrated the power of ECFE as universal prevention to strengthen families by improving parenting knowledge and skills, building positive relationships among family members, and connecting with community resources. To increase parents' ability to provide a *nourishing environment*, ECFE functioned as an effective model for the online PTP in Montana and set up a strong foundation for children's future school learning and life success.

Barriers to In-Person Participation and Retention

A low participation rate has been a common barrier to most in-person PT programs. "Mainstream parenting programs have difficulty recruiting and maintaining the involvement of disadvantaged parents" (Andersson et al., 2019, p 2). This difficulty was especially true for families with school-aged children since these parents typically work full-time jobs. Viola et al. (2020) mentioned that only 32 out of 530 parents solicited in a large urban low-income district attended the PT presentations, which led the school district's consideration to provide an accessible online format to increase participation in future training. ECFE was a sophisticated program developed over 40 years but still struggled to engage more than half of the eligible

population. Walker et al. (2013) reported only 44% ECFE participation in one of the largest districts in Minnesota, the Saint Paul school district.

Cultural Barriers to Implementation

Beyond participation and retention rate and the cost of the development/adaptation process, cultural barriers could be another significant challenge to implementing parent education programs. Meeting the families' needs required PT educators and program designers to tailor the classes according to the parents' cultural background, which could be exceedingly challenging due to the extra costs of the implementation and the limited multi-cultural competence of the parent educator and the program designer.

Lau et al. (2011) studied a culturally responsive parent-training program designed to address the needs of high-risk immigrant families that was implemented as an intervention for child behavior problems by improving the parenting of Chinese-speaking immigrants. Discoveries indicated that parents' cultural barriers could significantly challenge their learning and reinforce new parenting skills. Qualitative interviews with the participants and the group leaders also showed that slowing the pace of each class and increasing the times of practice exercises are necessary for the immigrant families to gain a better understanding and build their confidence in the process (Lau et al., 2011).

Another study regarding cultural adaptation was about The Parent Management Training Oregon (PMTO) model introduced into the Netherlands as an intervention for children (aged 3-12 years) with severe behavioral problems. Investigation of the factors for the successful implementation discovered that adoption of the local and social contexts of the environment, the culture of the organization operating the program, and the characteristics of the individual professional facilitators are all critical to the process (Behhema et al., 2008).

Anderssen et al. (2019) described the enormous efforts and intensive collaboration demanded from a team of multiple stakeholders when bringing Triple P into remote Australian Aboriginal communities. It took a five-year journey to carry out the four stages involving community consultation and culturally appropriate resources, the training of parent coaches and ongoing clinical support, and the collaboration on results dissemination to communities (Andersson et al., 2019). With the significant positive results from the final report of this project, it could provide a model for indigenous communities internationally. Nonetheless, “the barrier of the high cost involved in implementing the partnership and adapting the project to the local context” (Andersson et al., 2019, p 8) raised a question to the policymakers concerning the Return on Investment (ROI). In conclusion, resolving the cultural barriers to implementation is a foundation for a successful PT implementation.

Investigation of Technology-Based Platform for PT

The rapid growth in technology applications in education brought opportunities to increase the accessibility of PT programs. Relevant research within the recent decade is gradually paying more attention to the strengths and weaknesses of parent education delivered through online/distance platforms (Bearss et al., 2017; Clarkson & Zierl, 2018; Enebrink et al., 2012; Kobak et al., 2020; Sanders et al., 2014). Notably, the COVID-19 pandemic highlighted the vast need for access to virtual synchronous parent education where live learning exists without physical transportation and potential exposure. Vilches et al. (2021) conducted a qualitative study on teachers’ experience during rapid adaption from in-person to an online setting and presented the result at the NCFR Annual Conference 2021. Similarly, Walker (2021) surveyed ECFE parent educators and shared the findings at the MNAFEE Fall Professional Development Training (virtual). Even though these two presentations are not published as peer-

reviewed articles, the information is included in this study because the most current relevant kinds of literature were not readily available by the time of this research review.

Mixed-Technology Implementation to Increase The Accessibility

An experimental Internet-based Parent Management Training (PMT) program in Sweden seeks to address the lack of access caused by the shortage of PMT professionals and parents' difficulty in participating due to working hours and other limits. In one of the first RCTs of Internet-based PMT programs, Enebrink et al. (2012) explained that the seven-session (1.5 hours each) courses were distributed over ten weeks because some sessions required two to three weeks to complete the homework; each session contained written text, videos of interaction between a parent/child, and illustration. The participants take the course on the Internet individually, receive feedback/guidance from program assistants, report progress and homework, or post questions/comments on a monitored parenting discussion forum (Enebrink et al., 2012). Evaluation of program efficacy, dose-response ratio, and cost reported medium effect size (less than in-person group) for child's behavior problems. However, the outcome was maintained at a 6-month follow-up (Enebrink et al., 2012).

Nonetheless, parents reported less use of harsh and inconsistent discipline but more positive praise and incentives; a high percentage, 69.2%, of the participating families that both parents of the child were taking the course together, which was satisfying compared to 8% in a face-to-face group. Enebrink et al. (2012) confirmed that the data reflected the dose-response relationship. The child's behavior problems decreased by 6.5 points for every session the parent participated in; in other words, the larger number of completed sessions related to more improvement in the child's behavior. The estimated cost for 7-session Internet-based intervention

was 1,106 SEK per child, equal to about \$127 (Enebrink et al., 2012), which indicated high practicability for implementation.

Sanders et al. (2014) made the first comparison between Triple P Online (TPOL) versus Self-Help Triple P (SHTP) in a study conducted in New Zealand that dealt with the significant challenge of the participation rate. Parents of 193 children (aged 3-8 years) who showed early-onset conduct problems attended in two groups. The TPOL contains eight modules with videos, exercises, and downloadable worksheets and tips. The SHTP used workbooks to teach ten weekly sessions with readings, activities, and homework that address the same content as TPOL. Measurements demonstrated statistically significant effectiveness from both interventions at a similar level in a child's disruptive behavior, positive parenting, family relationships, and parental adjustment; the 6-month follow-up proved largely remained effects with slightly higher maintenance stability in fathers than mothers. Therefore, both TPOL and SHTP could be cost-efficient options to enhance the population reach of a parenting intervention to reduce child maltreatment and behavioral problems (Sanders et al., 2014).

Parenting training via Telehealth (communication technologies) for children with autism spectrum disorder (ASD) and disruptive behavior was conducted in an attempt to resolve the limited access to a trained specialists in rural and underserved areas (Bears et al., 2017). The treatment delivered by trained therapists from a specialized autism center to 14 families at four rural community sites included 11 core sessions and two additional and three telephone booster sessions that lasted 24 weeks. Bears et al. (2017) stated that findings from this pilot trial showed high rates of engagement and satisfaction, as evident by 93% completion and 95% of attainment of session objectives, demonstrating the feasibility and preliminary efficacy.

However, one limitation of in this study was that families were paid for participation, which might impact the process and the parents' reports. As Bears et al. (2017) suggested, a larger-scale trial with a control group would be necessary to test whether PT via Telehealth could be a reliable method to extend immediate treatment to families or train clinicians in underserved areas. Several challenges encountered during the project process also needed to be explored; for instance, even with technical support staff available, all four sites experienced screen freezes, timing lags, and occasional drops of video connection. Also, each site required staff the management of the group gathering and maintain the Telehealth equipment (Bears et al., 2017).

An eParenting program was developed by a group of educators at the University of Wisconsin-Extension (UWEX) and state specialists to support families of children (9-14 years old) in the school districts, explicitly assisting parents to gain a better understanding and new skills about digital media use in parenting. The program was designed as one 2-hour workshop followed by weekly online posts or short articles delivered through emails that reached more than 48,000 families (Clarkson & Zierl, 2018). Over three years of study of parents with children who were in fifth to eighth grade, many reported positive changes in "parents' understanding, behaviors, and attitudes related to the use of digital media in parenting after reading the eParenting blog" (Clarkson & Zierl, 2018, p.3). In addition, eParenting enhanced the connection between families and schools; parents trusted the information provided by their children's schools (Clarkson & Zierl, 2018)). Essential factors that led to the success of the eParenting program, as highlighted by Clarkson and Zierl (2018), included the committed funds, staff time, and the strong partnership between school leaders and the University of Wisconsin-Extension as the program developer.

The lack of access to parent training for behavioral intervention challenges families in need and many clinicians. To investigate a technology-based, user-friendly, and highly acceptable platform with the potential to increase the accessibility of Behavioral Parenting Training (BPT), Kobak et al. (2020) conducted a pilot study on an online course combined with live remote coaching for training 22 mental health professionals throughout the United States. This training comprised of two parts and took the trainees 69.57 days on average to complete. Part one was an online didactic tutorial that included ten modules and covered features of four parenting skills: labeled praise, positive play, commands, and time-out. Part two was a 60-minute live remote coaching session that reinforced learned knowledge by modeling and role-playing (Kobak et al., 2018).

To conclude, the operation of this first-time approach in technology-based BPT training was successful; participants reported high acceptance and satisfaction in terms of the online format and improved BPT knowledge/skills. Despite the small sample size and absence of a control group, results pointed to the potentiality of increasing the availability of BPT service and training through a fully developed technology-based platform (Kobak et al., 2020).

Rapid Adaptation to Online/Virtual Settings During COVID-19

Vilches et al. (2021) at Alabama Cooperative Extension researched to learn the teachers' pedagogical experience in sustaining an online emotion-coaching parent education that was rapidly adapted from in-person Tuning into Kids™ program due to the interruption caused by COVID-19. The presentation at NCFR explained that multiple technologies and telephones were used to deliver content. With five focuses on technology, location, curriculum adaptations, parent motivations, and pandemic and diversity, the results discovered that “Age or broadband were not

barriers. Even low-broadband participants could be reached, often better than in-person because child care and work hours could be accommodated” (Vilches et al., 2021, p. 1).

Other findings from Viches et al.’s (2021) study demonstrated several vital factors that call for attention from the practitioners in the field. First, an online location requires facilitators to observe the non-verbal cues; family needs may disrupt teachers and parents since the location is typically at home. Secondly, pedagogically informed teaching is imperative, and using videos, handouts, and other creative strategies/tools is helpful. Thirdly, a diverse body of participants was motivated by various reasons; some desired to learn, while others were court-mandated for family reunification. Lastly, the factor regarding pandemic and diversity reflected, “It is not necessarily a Black or White thing - rather it is a poverty thing” (Vilches et al., 2021, p. 1). Overall, as Vilches et al. (2021) indicated, online parent education is under-studied, and these themes contributed valuable data to successfully facilitating virtual PT programs.

Walker (2020 & 2021) conducted two surveys to explore the ECFE parent educators’ experience regarding the shifts between in-person classrooms and distance learning delivered through mixed technologies to cope with the pandemic. Two hundred twenty-nine ECFE parent educators from 89 public school districts in Minnesota participated in the survey and provided professional and personal insights. Parent educators reported a significant challenge during the adaptation because they were not trained or prepared for online/virtual teaching. Maintaining the relationship with the parents/families in their classes required tremendous extra effort and time, which added much more work in addition to changing the instructional strategies and teaching materials.

Furthermore, Walker (2021) reflected upon the importance of addressing families’ needs for equity and access when classes were delivered through online/virtual platforms. Some

districts were able to give iPads to families in need. Flexibility was another critical element in supporting the families and motivating participation. In addition, parent educators indicated that some families were excited to get back in person, but some were hesitant. So many districts decided to offer both in-person and online/virtual classes to meet the different needs of the families.

Chapter Summary

Based on a comprehensive literature review, considerable evidence supports the immediate (post-treatment) and midterm (six to 12 months) effectiveness of in-person parent training as an intervention for a child's mental and behavior/conduct disorders. Maintaining the positive outcomes for the long term was difficult. Buffering from relapses demands strategies such as robust sessions, continued social support, and consultations from the professionals to assist the parents, particularly for those most vulnerable families.

In-person parent education as a preventive program has been demonstrated to be impactful in strengthening parenting ability and empowering the families to build a *nourishing environment*. Nevertheless, a lack of universal access to these programs is a problem waiting to be resolved. Recruitment, participation, and retention rates remain significant challenges for PT programs, especially for low-income families in many underserved areas. Cultural exclusiveness or stigma often exists as another barrier to parent education implementation, which demands specific design to meet the needs of local communities; extra awareness that respects the culture and people, as well as committed funds and policy support, are critical to establishing a successful program.

Technology application in parent training has been increasing in the recent decade to expand program accessibility. Studies on PT programs that use mixed technique tools such as

videos, emails, social media, and online discussion boards showed participant satisfaction and higher attendance of both parents compared to in-person programs, which indicates that an Internet-based platform could be an efficacious option for families who lack the time or transportation to attend in-person classes. However, occasionally, technical issues may impair the learning process and break the flow of group engagement, which requires a backup resolution from the educator and the program delivery management systems.

A significant portion of in-person PT programs experienced a rapid adaptation to online/virtual classrooms. Surveys with parent educators reported challenges caused by a lack of technical training and difficulties maintaining relationships in online/virtual classrooms. Unfortunately, the most recent research articles regarding parents and families' firsthand experience with virtual live parent education were not readily available.

This literature review did not find research articles specifically focusing on a virtual synchronous, group-based, preventive parent education program that promotes a *nourishing environment* in families. This is because of two possible factors: One, the current research is lacking, and two, with COVID-19, everything was switched online and back to in-person, so it was a relatively new and uncertain territory. This current research aims to fill the gap by evaluating a pilot parent education program designed for virtual synchronous classrooms and initiated in Whitefish, Montana, in 2021. The program curriculum is developed based on the ECFE Parent Education Core Curriculum Framework and tailored to meet the needs of families in the group and fit the community's local culture.

In summary, this literature review provided insightful information regarding parent education's effectiveness, accessibility, and practicability. The perspective of *structural family systems theory*, assuming that functioning change in the parent automatically leads to changes in

the children, was confirmed. Evidence revealed that family is the root of a child's healthy development; therefore, supporting parents is the pathway to building a *nourishing environment* for the well-being of children and their families. Research also pointed out the topical limitations in the field: the lack of universal access (especially to preventive programs) and trained parent educators (particularly in underserved areas) related to program cost; the challenge of recruitment and participation rate because of cultural barriers, and families' busy schedules; difficulties of maintaining new parenting practices and positive results in children due to a shortage of continued social and professional support.

The review of articles highlighted the essential questions: *What are the parents perceived impact of a virtual synchronous, group-based, preventive parent education program as support for families to build a nourishing environment for their children?* The second question concerns *the strengths/limitations and how to improve the virtual program?*

The current research seeks potential answers to these questions through the evaluation of a pilot program in the process of being developed and implemented in an underserved area, where there is a cultural perception that family affairs should be private, and there is a stigma around seeking help from outside of the family. Nevertheless, this literature review drew a thorough roadmap, marked a specific direction for the current research, and further prepared the researcher for the next step— Chapter Three: Methodology, wherein the method, setting and sample, data collection and analysis procedures, and other components of the study will be discussed.

CHAPTER THREE: METHODOLOGY

The literature review showed a plethora of quantitative studies relating to the topic; therefore, in order to gain in-depth perspectives of the participants, the researcher is employing a qualitative method for this study. Weiss (1994) indicated that a characteristic of the qualitative method is to understand a situation through interviews that encourage respondents to provide a complete account of their experience. Daly (2007) highlighted that qualitative research emphasizes the process of change with a particular interest in understanding how individuals or families make transitions. Both characteristics and processes of the qualitative design proved appropriate for this study: to understand the process of changes in the individual participant and their families.

There were only five qualitative articles involved in the literature review. Two of these studies (Gonzalez & Villalba, 2018; Lau et al., 2011) assessed the efficacy and feasibility of in-person programs with a focus on immigrant families. Another two (Furlong & McGilloway, 2015; Stewart-Brown et al., 2003) explored the long-term effectiveness of in-person parent training (PT) programs as an intervention for children with behavioral and mental health problems. The last one (Harrison & Vliet, 2013) evaluated an in-person PT program as prevention with an emphasis on the cooperation between school, parents, and university academics. There appeared to be a gap in the assessment of virtual preventive parent education programs that provide participants universal access to a live learning experience (Clarkson & Zierl, 2018; Vilches et al., 2021). This study aimed to close this gap by evaluating the impact of a pilot virtual synchronous, group-based preventive parent education program. The goal is to test whether it could be an additional alternative to in-person PT to increase accessibilities and

examine its effectiveness in empowering parents/families to build a *nourishing environment* for their children's well-being and successful development.

Method

A qualitative method was employed in this study. "Research aims should dictate research method" (Weiss, 1994, p. 9). To learn the perceptions about how participants' virtual parent education experiences influenced/changed themselves, their parenting, and their families, and to identify critical factors of the strengths and limitations for the improvement of the virtual program, this research embraced a qualitative method to better engage and gain a thorough understanding through in-depth one-on-one interviews using open-ended questions. A pragmatism interpretive framework guided the procedure of the inquiry since the primary purpose of the research was "To find solutions to real-world problems" and followed the ontological belief, "Reality is what is useful, is practical, and works" (Creswell & Poth, 2018, pp. 34-35). In this case, the real-world problem was the lack of universal access to effective parent education in Montana, the residential location of all participants in this study, a state wherein there was an urgent call to prevent student mental health problems and the suicide crisis. An effective virtual parent education program may increase accessibility and meet the emergent needs of the local communities.

Since qualitative research is essentially inductive and seeks an understanding of perceptions (Daly, 2007), this research integrated a *Constructive Grounded Theory* from Charmaz (2014) to direct the process, including the interview question design and the data collection and analysis. As Charmaz (2014) defined it, *Constructive Grounded Theory* "acknowledges subjectivity and the researcher's involvement in the construction and interpretation of data..." (p. 14). In a constructivist approach, the theory/thesis development

results from a co-construction process dependent upon the researcher's interactions with participants and the field (Crewsell & Poth, 2018). In this study, the researcher co-constructed the themes with the participants through one-on-one interviews, follow-up emails, and virtual live communications during and after the parent education sessions.

The Setting

This research location was Whitefish, Montana, USA. According to the World Population Review (2021), the population in Whitefish was 8,915 in 2021, and it was listed as the 11th largest city in Montana; the demographic was White dominant (97.45%), with a poverty rate of 7.56%. There were 1,500 students in the district, and only 5% were from a minority background (Whitefish School District, 2021). Family life was perceived as personal and private and was not expected to be discussed in Montanan culture; there was a stigma around seeking help outside of families; instead, they sought to solve family and personal problems by themselves (PBS NewsHour, 2020). This stigma was a barrier to the recruitment for the parent education program, especially in the beginning stage of development and implementation.

The Sample

The sample of this study included eight participants of a pilot parent toolbox program (PTP) initiated in 2021 and later renamed E³ Parent Education (E³PE). The participants were parents and grandparents of children from birth to eight years old, and each of the participants attended at least eight sessions of the parent education classes by the time of the interview.

All eight attendees (n=8) in the E³ PE Fall 2021 group voluntarily participated in this study, making the participation rate 100%. The convenient nature of the virtual format allowed two participants to attend the group even though they were not from the local community, which led to the diversity of living locations in the sample. More diversity was reflected in the ethnic

background: One participant was Asian Chinese, one was of Latino descent, another was the spouse of a Jamaican, and again another adopted a 2-year-old daughter from an African-American background. There were six parents (one father and five mothers), and the other two were grandmothers. The young children in the eight families were between two and eight years old. The eight participants' two common characteristics included their educational level with a B.A. or master's degree; all were married (see Appendix C: Table 3.1).

The E³ Parent Education Program

The E³ Parent Education (EPE) was initially designed for a virtual synchronous platform delivery to ensure safety amidst the COVID-19 situation and provide parents convenient access. In addition, the synchronous classes provided a live experience for group learning. E³PE was designed as an ECFE-like model to provide ongoing support to the families meanwhile embracing the ECFE core curriculum framework that included five dimensions: parent development, parent-child relationship, child development, family development, and cultural and community.

E³PE is comprised of three phases: *Extending*, *Enabling*, and *Enlightening*. This research mainly evaluated Phase One— *Extending* because the participants completed only this phase when the interviews were conducted. The central focus of this phrase was parent-development and acknowledged the definition of parental love as the parents' will to extend their self for the purpose of nourishing their self-development and their children's growth (Peck, 1978). The courses were tailored to meet the families' needs, and the list below shows ten examples of the topics discussed in the group learning sessions:

- Parent self-care, self-sacrifice, and self-indulgence
- Parenting stress management

- “Work with children” instead of “do to” attitude
- Developmental needs of the children
- Parent guilt & risk of confrontation
- Five listening styles
- Trauma-informed parenting
- Encouragement vs. praise
- Growth mindset & the power of “Yet”
- Beyond discipline to guidance

The first 20 classes were implemented through the Community Education department of the Whitefish School District, Montana, between January and July 2021. Due to policy concerns, the recruitment for the initiation of PTP was limited to a simple calendar for a list of multiple adult education classes sent via email to the elementary school families in the district. Only two families joined the first eight sessions. The number increased to five in the second eight sessions through word-of-mouth recommendations to friends and families by the original two participants. Four new families registered for the classes in Fall 2021, the program was updated, and the title changed to E³ Parent Education (E³ PE).

Role of The Researcher

The researcher is a graduate student at Concordia University, Saint Paul (CSP), who is the solo practitioner conducting the study to complete the graduate work under the supervision of the CSP graduate faculty. The researcher is a licensed parent and family educator familiar with the ECFE model and a member of several professional groups in the field of family education. Having consulted with three experts in the field of family education, the researcher designed the PTP (later changed the title to E³ PE) as an ECFE-like program and tailored the content to cope

with the local culture in Montana and meet the needs of the participating families. Meanwhile, the researcher had also been the facilitator of all the virtual parent education sessions from January 2021 to the time the interviews were conducted.

Since the researcher was co-constructing the theory with the participants through a *Constructive Grounded Theory* method, it was critical for the researcher to be attentive to personal values/biases during the interview and analytic process. “Awareness of self during data collection is vital” (Richards & Morse, 2013, p. 57). On the one hand, it was advantageous that the researcher had developed close and trusting relationships with the participants through teaching the classes. On the other hand, special attention was required to the potential social influence on the participants that might make them feel pressured to report positive feedback.

Data Collection Procedures

Richards and Morse (2013) suggested, “The strength of qualitative inquiry is in the integration of the research question, the data, and data analysis... there is no rigid sequence of data collection and analysis” (p. 1). Within the current study process, the majority of the data was collected from one-on-one interviews through online Google Conference; each interview session lasted about one hour, and each interview in its entirety was recorded as a video. The interview schedule began in January 2022 after receiving approval from IRB (see Appendix A). In addition, supplemental data was collected from follow-up emails with the participants.

To support the content validity of the interview questions, the researcher spent a considerable amount of time reflecting on the teaching experience, listening to the participants’ viewpoints during/after classes, and combining with the comprehensive literature review to inform the eight interview questions aimed to address two research questions (see Table 3.2). A

semi-structured approach was applied to design the questions considering its advantage in allowing the flexibility while maintaining the momentum for an in-depth interview (Daly, 2007).

Table 3.2: Semi-Structured Interview Questions	
Research Questions	Interview Questions
1. What is the impact of the pilot virtual synchronous group-based parent education on the participants in terms of strengthening their parenting capacity to build a <i>nourishing family environment</i> for their children’s development and learning?	1. What has motivated you to take parent education classes?
	2. What are the changes you are aware of in you and your parenting during/after taking parent education classes?
	3. What changes, if any, have you observed in your children during/after your taking parent education classes?
	4. a) Have you noted connections between the changes in you and the changes you've observed in your children's development and learning? b) if so, what are they?
	5. What are the greatest challenges for you to practice and maintain the new parenting philosophies/skills you learned about in the classes?
2. What are the strengths and limitations of this virtual program and how to improve it?	6. What are the strengths of this virtual parent education program in your opinion?
	7. What are the limits/weaknesses of the virtual parent education classes?
	8. What are your suggestions on improving the class/program?

Furthermore, the research and semi-structured interview questions were shared with field experts, and the feedback was used to improve the interview questions. The focus of the interview contains two inquiry domains: 1) The impact of the virtual synchronous group-based E³PE program on the participants and their ability to build a *nourishing environment* for their children’s development and learning; 2) The participants’ perspectives on the strengths and limitations of this virtual parent education program and their suggested strategies to improve it.

The research context was explicitly targeted toward the pilot virtual synchronous group-based E³PE program initially developed and implemented in Whitefish, Montana, in 2021. The design of the lessons was based on ECFE Core Curriculum Framework and adjusted from two-generational education (parents and their children) to parent-only education. Universal free access was provided to all families with children under 18 years old. The program was initially provided to the families in the district; however, the virtual format allowed families to participate from both local and distant communities.

Data Analysis Procedures

Recorded one-on-one interviews were transcribed into Word documents and analyzed alongside the supplemental information from follow-up questions through emails. An inductive approach was implemented to emerge with the flow of the data (Crosley & Jansen, 2020). After a thorough study of Saldana's (2013) *Coding Methods*, combined with multiple other scholars' works, including but not limited to Charmaz (2014), Creswell and Poth (2018), Richards and Morse (2013), Daly (2007), and Bradley et al. (2007), the researcher carefully designed a four-step qualitative data analysis process (See Figure 3.1).

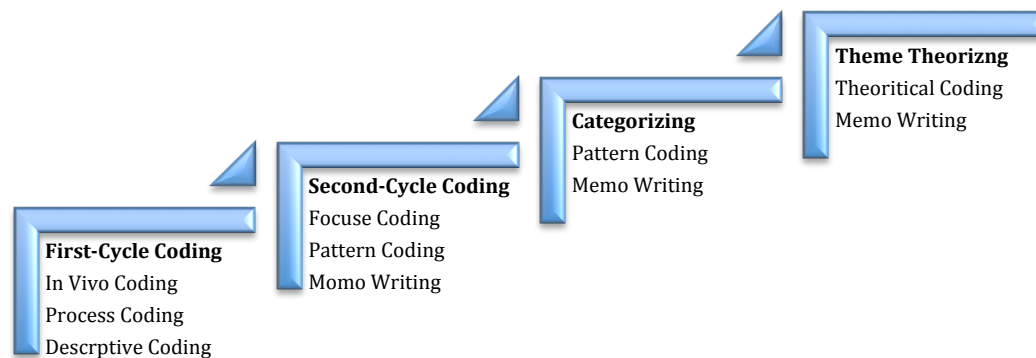


Figure 3.1: Four-Step Data Analysis

Step 1. First-Cycle Coding: In Vivo coding was a method used to preserve the organic perspectives of the participants. Also, some Descriptive codes and a small number of Process codes were used to summarize the scenarios and connote the actions.

Step 2. Second-Cycle Coding: Focused coding was employed to label the conceptual similarities among the first-cycle codes and categorize the data of each interview.

Step 3. Categorizing: Pattern Coding was applied to identify similarities among the eight categories from the second cycle; Memos were also used to synthesize a higher-level summary category for each interview question.

Step 4. Theme Theorizing: Theoretical Coding was the primary method implemented and assisted with Memos to discover the center category and then derive the primary themes through a repeated cycle of data/code/category organization and analysis.

During this process, one of the principles that the researcher followed strictly was “... being rigorously ethical with your data and not ignore or delete those seemingly problematic passages or text” (Saldana, 2013, p. 37). Moreover, several tables and figures were used to gather and display the dynamic relationships between the codes, categories, and themes.

The procedure is also referred to a *Constructivist Grounded Theory* wherein the questions were designed to “invite alternative perspectives, diversity, and uniqueness... Data are co-constructed by the researcher and the researched” (Daly, 2018, pp. 100-107). The analysis linked the information gathered from the participant responses to the literature review for a research-to-practice comparison to contribute meaningful information to address a gap in the universal accessibility of parent education.

In addition, Creswell and Poth’s (2018) advice for *Ground Theory* analysis was implied to explain the meaning of the participant responses through a “... process of reducing the database to a small set of themes or categories that characterize the process or action being explored...” (p. 203). The analysis aimed to demonstrate whether a virtual synchronous group-based parent education could be an effective alternative prevention method/strategy to empower parents in building a *nourishing family environment* for their children’s successful development and learning.

Validation

Multiple strategies were enforced to validate this study considering the suggestions of Creswell and Poth (2018). First, collaborating with participants with total respect for their stories

and expressions sets up a background of objectivity. Secondly, having experts in the field review and debrief the research process ensured the qualitative study was on the right track. Five advisors and mentors were involved in providing advice: two faculty advisors at the university where the researcher was taking the study, and another three senior professors, experienced practitioners, from other institutions. Thirdly, a professional writing mentor who was not a practitioner in the parent education field functioned as an external audit and a safeguard supervising the literature writing process. Lastly, prolonged and persistent field observations contributed to up-to-date vision. The researcher has been an active member of several professional associations, such as the National Parent Educator Network (NPE), the National Council on Family Relations (NCFR), and the Minnesota Association of Family and Early Education (MNAFEE). Especially a weekly peer exchange meeting at Perfect Connection with a group of licensed parent educators at ECFE throughout multiple school districts in Minnesota deepened the researcher's insight into the daily practice of parent education.

Ethical Issues

There was no predictable risk or harm to the parents/grandparents who participated in the research voluntarily. Confidentiality procedures were implemented to protect the participants, and none of the data collection included the names or personal information of the participants or their families. The interviews took place in Zoom or Google Conference and were recorded for analyzing the responses; those video records were saved in a Google Drive folder on the researcher's computer. Only the researcher has access to the password; after five years of completing the research, the file will be deleted permanently. The supplemental documents (follow-up emails) did not include any personal information of the participants.

There was no deception during the study process. Participants received a letter of introduction providing the information about the researcher, contact information of the thesis advisor, as well as clear information about the research (see Appendix D). Along with the information letter, digital Informed Consent was provided to all participants. Participants were asked to review and sign the consent form (see Appendix E) before conducting the interviews. All documents were submitted to the Institutional Review Board (IRB) for review according to the legal and institutional requirements, and the interviews were scheduled only after receiving the approval from IRB.

The cost and benefits of participating in the study were clearly communicated during the recruitment process and before signing the consent form. A potential cost was the time participants spent in the interview (about one hour). Regarding possible benefits, a copy of findings from this research was provided to a participant if requested, and an email address was included in their consent form. The knowledge from the research will be incorporated to improve the E³PE program, which will benefit all of the current and future parents and families attending the program. Furthermore, the findings may contribute data to fill the gap about the impact of virtual synchronous parent education and provide important information to the practitioners and the academic community. Participating in this research contributed to developing and improving universal parent education practices that promote a *nourishing environment* in the families, the communities, and society.

CHAPTER FOUR: RESULTS

The in-depth one-on-one interviews with eight participants yielded an enormous amount of information. After an inductive systematic and thematic four-step data analysis through mixed coding methods including In Vivo, Descriptive, Process, Focus, and Pattern coding, as well as Memo writing, five major themes were constructed from transcription and analysis: *motivation, impact, challenge, strengths and limitations, and suggestions for improvement*. Table 4.1 shows the outlines of the themes and the subthemes.

Table 4.1: Themes (and subthemes) of Analysis

<p>Theme I: Motivation</p> <p>Subtheme: <i>Love and “A Good Fit”</i></p> <ul style="list-style-type: none"> • Parental love is an intrinsic drive • A good fit between needs and access
<p>Theme II: Impact</p> <p>Subtheme 1: <i>Significant changes in parents and parenting</i></p> <ul style="list-style-type: none"> • Benefits are immediate • Increased self-care/self-love • Improved parenting capacity • More confidence • Feeling supported <p>Subtheme 2: <i>Tangible positive outcomes in children</i></p> <ul style="list-style-type: none"> • Better attitude • Improved behavior • Increased abilities <p>Subtheme 3: <i>Connection between changes in parents and changes in children</i></p> <ul style="list-style-type: none"> • Parent role modeling • Passing tools on to children <p>Subtheme 4: <i>Influence on family environment</i></p> <ul style="list-style-type: none"> • A calmer household • Improved couple relationship
<p>Theme III: Challenges</p> <ul style="list-style-type: none"> • Busy and stressful daily life • Breaking the old behavioral patterns • Building new habits • Coping with challenges
<p>Theme IV: Strengths and Limitations</p> <ul style="list-style-type: none"> • Strength of virtual accessibilities • Well-prepared educator and courses • Limitations of online interaction
<p>Theme V: Suggestions for Improvement</p> <ul style="list-style-type: none"> • Providing both virtual and in-person opportunity • Offering multiple types of classes

Results Addressing Research Question One

As described in Chapter Three, a semi-structured approach was applied to design the eight interview questions and focused on two inquiry domains, which became the two research questions. The data gathered regarding interview questions one to five mainly served to generate the first three themes, addressing the research question one: *What is the impact of the pilot virtual synchronous group-based parent education on the participants in terms of strengthening their parenting capacity to build a nourishing family environment for their children's development and learning?*

Theme I. Motivation: Love and “A Good Fit”

The intrinsic motivation for participants to take parent education classes is love for their children. As a mother, Participant 7 clearly indicated, “I was motivated by the love for my 6-year-old son...As the child gets older... their needs change very much, and it becomes more challenging if you do not educate yourself on how to respond to a six-year-old.”

Five of the eight participants (75%) discovered the parent education resource through friends/family. A pattern among the stories of these five parents is that they had challenges in parenting and talked with a friend, and then this friend shared what she benefited from the parenting education class and invited them to come with her. Based on the trust of the friend, the low time commitment (weekly sessions), and the easy (virtual) and free access, they took the opportunity to try it out. Therefore, “A Good Fit” between the families’ needs and the access to the resource is the fundamental condition that motivated the participants. Logically, “friend recommendation” could be considered as access to the resources. However, for the purpose of the study, the “access” in this case specifically regarded the virtual login and free of charge (see Figure 4.1).

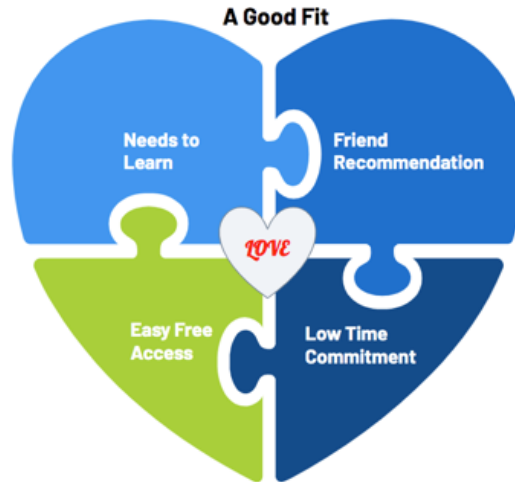


Figure 4.1: Love and “A Good Fit”

Participant 1, who joined the program in January 2021, recalled, “I just found it through the Whitefish parenting options. It sounds interesting to me... And, I thought, this could be a way do something that not a lot of time involved, or money...low commitment.” One of the five participants who received the recommendation from Participant 1 described:

I learned about your class through P1. She is a family friend, and she told us about it. It seems like a good idea because I spend a lot of time with my children, and I also feel quite limited in some ways of how I parent... I really want to be a good parent to them so that when they are older, we can have a good relationship. I had a slightly difficult relationship with my parents as I became an adult... It is a very short but important job because the kids are growing up. The parents are the first people to help them to understand the world. It is a very important job, and I want to take it seriously. (P 4)

One message from Participant 8 attracted the researcher’s attention. All the parenting sessions she attended previously were mandated because she adopted a daughter; every participant in those sessions was mandated for various reasons. This was the first time she saw that all group members were self-motivated to learn about parenting.

Theme II. Impact: Changes in Parents Led to Changes in Children and The Family

Participants reported significant changes in themselves and their parenting after/during the parenting classes. The impact on parents, directly and indirectly, led to tangible positive outcomes in their children and improvement in the couple’s relationship. The dynamic of the changes created better understanding, closer connection, and more harmony in the household, which resulted in “A Calmer Household”– *A Nourishing Family Environment*.

Subtheme 1: Significant Changes in Parents and Parenting

The central focus of E³PE Phase I, *Extending*, was parent development, which provided information and support and encouraged parents to extend their self-efficacy to nourish their children’s growth. Four noticeable impacts on parents and parenting discovered from the participants’ experience are *immediate benefits, self-care and self-love, parenting capacity and confidence, and feeling supported*. Parent self-care and self-love stood out as the foundation for following improvements in parenting simply because they provided better energy and mental health for the parents in the first place so that they could be patient and present for their children. Additional information is explained in Table 4.2 below and followed by some examples selected from the numerous stories shared by the participants.

Table 4.2: Impact on Parents and Parenting			
<p>IMMEDIAT BENEFITS</p> <ul style="list-style-type: none"> • THERAPEUTIC • FEELING REJUVENATED • SELF-CALMING 	<p>INCREASED SELF-CARE</p> <ul style="list-style-type: none"> • GUILT RELIEF • PERMISSION • AWARENESS OF SELF-LOVE • PRIORITIZING SELF-CARE • BETTER MENTAL HEALTH 	<p>IMPROVED PARENTING CAPACITY</p> <ul style="list-style-type: none"> • AWARENESS IN PARENTING • MORE CONFIDANCE • TOOLS IN BACKPOKET • CALM PARENTING • FREEDOM TO THINK BEFORE ACTING • LESS REACTION • MEETING THE NEEDS OF CHILD AND SELF • IMPLEMENTING NEW SKILLS • BETTER ROLE MODELING FOR CHILDREN 	<p>FEELING SUPPORTED</p> <ul style="list-style-type: none"> • FEELING NOT ALONE • PEER COMFORT FROM SHARING • A SENSE OF COMMUNITY

Immediate Benefits. Every participant (100%) believed that the breathing and meditation technique at the opening of each session was nourishing. One specifically emphasized the immediate benefit that she experienced in the beginning:

Right after the parenting classes, I found it to be kind of therapeutic. And, I think that was a surprise to me. I guess that therapeutic piece after I felt rejuvenated translates immediately to my parenting with the kids. (P 1)

Increased Self-Care and Self-Love. Seven out of eight participants (87%) reported increased *self-care and self-love*. Parents mentioned that it was helpful when they received permission to do self-care from a professional parent educator, giving them grace and releasing guilt and a feeling of selfishness.

One grandmother who was the first generation of Asian/Chinese immigrants reflected, “I think the big change is the self-love part... All these years in the States, I was always busy and did not have time for myself. So from taking the classes, I am aware of loving myself more” (P 5). Participant 3, a mother, stated, “I have increased self-love for sure... Life gets so hectic and busy for me, but self-care is definitely more of a priority than it has ever been. I realize it is essential if I want to be the parent I want to be.”

Improved Parenting Capacity and Confidence. All participants living with young children (100%) identified increased *parenting capacities*, such as managing their emotions and helping their children to process feelings, being aware of and reducing reactions when interacting with their children, and being patient and present with the children. They built *more confidence* with the learned parenting tools. Participant 3 explained, “I think the thing I most aware of is confidence...I got these skills in my back pocket if I need them and get people I can ask for help if I needed it.” A father also shared his self-improvement as a parent:

I have a bigger toolbox for what to do when feeling angry and irritable. I have techniques to use like breathing, thinking about some of the things you [parent educator] said and some of the studies you mentioned, and I have more capacity to be a better parent. (P 4)

Additionally, *more patience* was noticed in every participant (100%) living with young children, even in the middle of challenging situations. A mother commented, “I think as I gain more knowledge, that brings a little bit more patience in parenting. I am not as quick to jump into reaction states...[this] enables me to be more patient and parenting in a less reactive way” (P 3). A grandmother shared, “Another thing I learned is stopping and breathing when things are tense or anxious, just stop, take a deep breath, and calm myself down. Also, listen to the children and the grandchildren” (P 2)

Feeling Supported. All participants (100%) recognized a feeling of “*not being alone*” and “*a sense of a community*” from the group learning and peer sharing experiences. Participant 6, a full-time working mother, mentioned:

I think there is some comfort in knowing that what I am experiencing is often not unique or that there are different approaches, and I can try something new based on how they [other parents] reacted to the situation. So I would say it helped from the perspective of not being alone and that much of what my child is doing is normal.

Subtheme 2. Tangible Positive Outcomes in Children

This subtheme is presented together with the next one because they are intertwined, and participants automatically combine them during the interviews. Borrowing an observation from a mother, “The main changes that I see [in my child] when I am actually implementing the tools” (P 7).

Subtheme 3. Connections between Changes in Parents and Changes in Children

Observations reported by each participant (100%) revealed that changes in themselves, directly and indirectly, led to changes in children. Children’s interaction shifted automatically in response to improved parenting. By intentionally verbalizing aloud while conducting self-care and sharing learned skills with children, parents helped them build more abilities. Below is a story from a father who reflected on why he wanted to be a role model for his children:

Because I think when I was a kid growing up, I did not know what I needed. I was not taught to identify what I needed, so even as a grownup, it was hard to know what I needed to do to take care of myself. But as I learned, I am trying to show them [my children] and teach them to do the same thing. (P 4)

Consequently, parents’ role modeling and passing tools on to their children led to tangible positive outcomes. All eight participants (100%) have observed better attitudes, improved behaviors, and increased abilities in their young children/grandchildren. One grandmother lived far from her children and grandchildren, but she was able to help them increase self-care through phone communications. Table 4.3 shows the relationship between improved parenting and the outcomes in children.

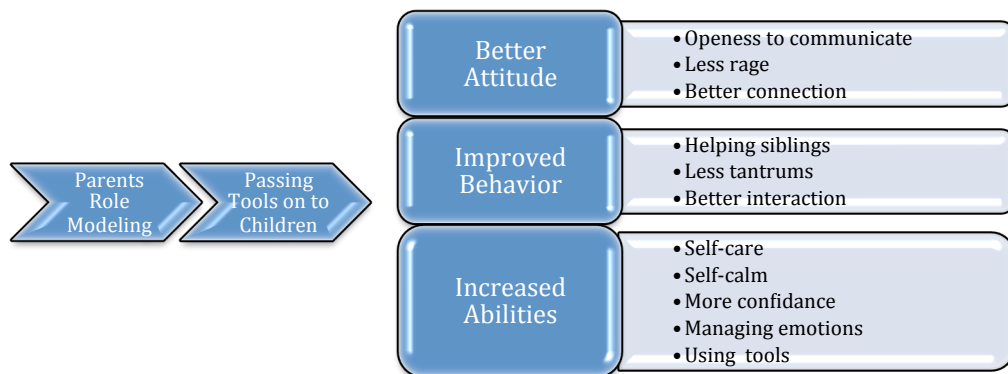


Table 4.3: Changes in Parenting Lead to Tangible Positive Outcomes in Children

Better Attitude. Among seven participants caring for young children, six (85.7%) reported a much better attitude in their children, including more openness to communicate, less anger, and better connection with other family members. A grandma shared happily, “I do not see the rage much now.” A mother said, “I am noticing that they [my children] are looking for more reasons to be appreciative.” Another mother described how she helped her son to be more open to conversations about emotions:

One of my sons was stiffer. He did not talk about his feelings at all...he did not want to. Through having the [emotion] sheet on the table... telling him it is okay to feel...helping him to have a word to explain how he feels... then he was able to point to a face and define, “I am feeling this way because...” (P 8)

Improved Behavior. Six of the seven primary caregivers (85.7%) shared how implementing new tools makes immediate and lasting positive shifts in their children’s behavior, including helping siblings, fewer tantrums, and better interactions with the parents. A father had joy watching his 8-year-old son help the 4-year-old younger brother with a tool of *the power of yet* when his brother said he could not do something: “Yet. You cannot do it yet.” Similarly, a mother shared how her 5-year-old son successfully stopped negative behavior with the help of the mother implementing a tool:

Just today, my younger son was really angry and told me he wanted to break a glass. He walked over to the cabinet and pulled out a glass. I helped him label his emotions by saying, “you are really angry right now, and you feel like breaking that glass.” I could immediately notice a shift in his energy. Acknowledging and naming his emotion helped him move past it. (P 3)

Increased Abilities. All of the primary caregivers in the group (100%) confirmed higher confidence and capacities in their children, such as self-care, self-calming, and especially, as a mother commented, “They are handling emotions better...”(Participant 6). Another mother described how her son calmed himself using a learned tool: “He got stressed out, and he was crying and saying, ‘Okay, I just need to take a deep breath...’ he just coached himself through it” (P 1).

Furthermore, some children used some tools to help their parents/grandparents: “They use the same techniques on me. So when I get excited or emotional, they will say, ‘okay grandma, breathe, five times’ ... and that was a big revolution to me” (P 2).

Subtheme 4. Influence on Family Environment

Parents’ growth positively influences the family as a dynamic unit. Seven of the eight participants (87.5%) often shared what they learned from the classes with their children and co-parenting families. Six (75%) expressed “a calmer home” where there is more understanding, harmony, and connection between the family members.

One distinguishing finding was the **improved couple relationship** after taking the E³PE classes, which surprised the researcher. All participants (100%) reported that they regularly shared with their spouses what they learned from the classes, and they discussed and implemented the tools and roles modeled for the children as a team. Three participants had invited their spouses to attend some sessions together. Especially, Participant 1, the first attendee of the EPE program, expressed gratitude regarding how taking the classes and learning and doing self-care helped her understand her spouse’s needs for self-care better and eliminated resentment and increased appreciation toward him; therefore, significantly improving the quality of the relationship in their marriage.

To summarize, the impact on parents affected the whole family and manifested a more nourishing environment (See Figure 4.2).

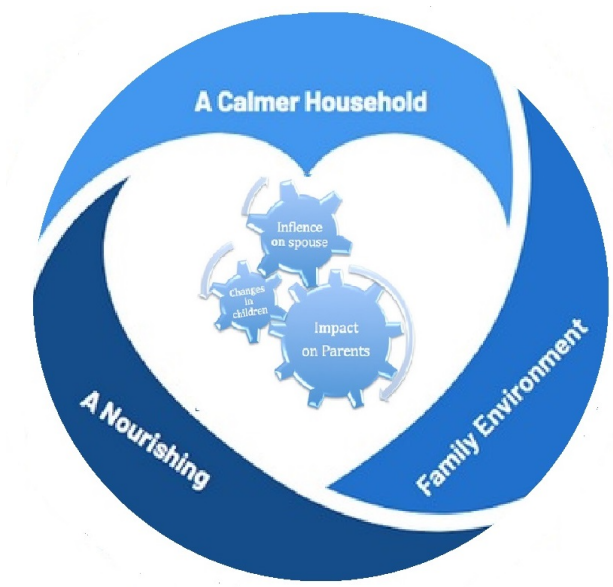


Figure 4.2: Impact on Parents Influenced The Family Environment

As a mother reflected, “Me gaining more of awareness and less reactivity always facilitate better connection with my kids... Our challenges are less, battles are less than in the past” (P 3). Another mother concluded, “When I am purposeful with my parenting tools, I see that my household, in general, is calmer and at ease” (P 7). Two of the stories shared by the mother, who had been engaging in the program since January 2021, best represented how this influence created a *nourishing family environment* and improved the couple’s relationship:

A Calmer Home: We really stuck with the meditation practice we implemented into our family, the breathing techniques... In the evenings, we will do a family meditation. Now my kids even ask if they can do a meditation that night, which is something our whole family looks forward to. That is a positive change, something we could do forever... like a calming evening family routine. (P 1)

Improved Couple Relationship: Because of having kids, there was a little resentment... I went full-on mothering... He was still able to create that time [self-care] for him, and I felt resentful... It was never about him saying no to me. I was the one saying no to me. Now I created this space for myself, so I am not resentful, and I realized that it was really good that he had boundaries... (P 1)

Theme III. Challenges for Practicing and Maintaining The New Skills

Busy and stressful daily life was a reported challenge for every participant (100%), which frequently caused difficulty in the retention of the knowledge and skills at the moment. One mother with a 2-year-old daughter and two sons in elementary school mentioned her struggle even committing to the weekly parent class due to busyness.

Subsequently, breaking old behavior patterns and building the new routines appeared to be particularly challenging since the process requires time and energy. Two participants vividly described “a wave” that illustrated varying practicing levels during the week: Took a class on Monday, which was energizing, performed well on Tuesday, slightly declined on Wednesday, on Thursday they got tired and started to lose attention, on Friday they ran out of energy and forgot the implementations, and in the weekend sometimes life got busier but sometimes they were doing better (See Figure 4.3). As a working mother commented:

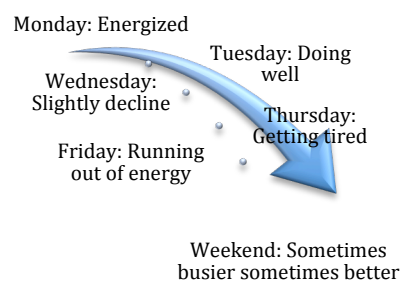


Figure 4.3: Unstable Practicing Wave

When you learned something fresh in your mind that week, and then as life gets busy, those things come up that are urgent or at least feel urgent at the time. There is a distraction, so I tend to put that aside... then I found myself reacting instead of exercising things I learned that would make me more proactive in dealing with the situation. (P 6)

In addition, various personal challenges were brought up, especially for the two grandparents. The reason for one of the grandparents not being able to open up is privacy concerns. She believed that grandparents do not have the same right as the parents when talking about the children or sharing inside family information. Knowing that other members in the group who have children going to the same school as her grandchildren, this grandparent worried that what she shared could be spread in the school, which may, in turn, hurt the family in some strange way. Another grandma talked about lacking the opportunities to practice the learned tools due to living distance from her children and grandchildren.

Coping with Challenges

Though not many parents reported strategies to cope effectively with these challenges, most felt they were recharged through taking a class the following Mondays. This experience specifically reflected the unique strength of the ECFE-like model that provides ongoing courses throughout the school year instead of only offering limited sessions, like other standard PT programs.

Moreover, five of the seven primary caregivers (71%) noticed that excellent self-care is the precondition for present parenting. The program's first participant shared her success by focusing on one takeaway at one time, making notes, and reviewing the notes regularly.

Moreover, she was paying specific attention to ensure self-care time:

I have been keen on noticing, “Oh, why did I feel so short of my patience? Oh yeah, I skipped a couple of my workouts...” This class and self-care every week... seem like I am a little off if I missed some of that. I just noticed that I need to take care of myself, which immediately affects how I treat my children. (P 1)

A mother who joined the group in April 2021 acknowledged her growing awareness even in the middle of a challenging parenting situation: “There were many times that I fell back to the patterns of reactivity, but I can feel awareness more than I had in the past...” (P 3). Participant 4, a father who also has been committed to the classes since April 2021, shared similar points and also came up with additional resources that he found helpful, including the vital support from his spouse, the children, and a therapist, as well as reading books and listening to podcasts. Nonetheless, the parent education classes are a critical element in this father’s formula to cope with daily challenges, as he gratefully commented:

It is hard to know what I would be doing if I were not taking these classes... I am learning every day with every class, just different tools to manage the situations that come up again and again. I think I am better equipped to respond to the kids when they challenge me.

In general, it occurred that, when attending more parent education classes with more committed actions in practicing the learned new skills during the week, participants performed better on improving parenting and handling the everyday life struggles.

Findings Respond to Research Question Two

The last two themes (*strengths and limitations* and *suggestions for improvement*) were derived from the participants’ feedback on the interview questions number six to eight in

responding to the second research question: *What are the strengths and limitations of this virtual program, and how to improve it?*

Theme IV. Strengths and Limitations

Everyone (100%) perceived that virtual is strength in light of four signatures: *Accessibility and availability, flexibility and guest speakers, coherency and vulnerability, and a safe learning environment.*

Strengths of The Virtual Platform

Accessibility and Availability. Participants praised the accessibility of being virtual, which allowed convenience for participants. People could log in quickly from the comfort of home without any physical transportation. Anyone could attend from anywhere as long as the Internet was available, which created opportunities for more diversity. Also, it lowered the barriers for parents with young children because it was possible to join the class while caring for the child without a babysitter. Additionally, no fees removed the cost barrier and ensured equitable availability for everyone. A mother reflected on her experience:

Just the easy access to it, you can log in two minutes or just on time, whatever, and that access is huge... Sometimes I need to take care of my son, and I can turn off my screen... but you still got to be in the class for 90% of it without disturbing others while taking care of your kiddo or whatever needs to happen. If it was an in-person class, you might not be able to come at all... (P 1)

Four participants (50%) predicted that they might not be able to join the classes if it was in-person, which means that the virtual participation rate could be doubled compared to in-person. The reasons they shared are situational. Participant 6 is a full-time working mother. She can commit to the one-hour session virtually, but it is unlikely for her to take transportation time

driving to the class. Similarly, Participant 4 is a part-time working father who plays a major role in caring for his two sons. Taking classes at home allows him to keep an eye on other duties simultaneously, which could be too much commitment if transportation is required. Participants 1 and 8 share the same story since they are mothers of three children, and the youngest needs full-time attention. The only option for them to attend in-person classes is if childcare is provided. They were excited when talking about the possibility that they could fully enjoy the parenting classes while a child teacher cares for their children.

Flexibility and Guest Speakers. A virtual platform is flexible for teaching instructions such as slide presentations, videos and pictures, and other online resources. Especially, distance login made it much easier for the arrangement of guest speakers with specific expertise (e.g., trauma-informed parenting and sex education) to meet the needs of families better. As Participant 6, a full-time working mother, indicated:

I like the range of the guest speakers... I think it is more flexible and accessible... it has also been helpful that we can chat in between. We watch this video, talk about it...and put something in the chat. It is really interactive.

Coherency and Vulnerability. Participants believed that the classes had been helpful as people felt okay with being vulnerable to share. The convenience of virtual login allowed friends from different areas to join the class together, which created a feeling of coherence in the group and enabled more vulnerability for deeper discussion that benefited the parents' learning.

Safe Learning Environment. Being a virtual secures safety during COVID-19; besides, it is more relaxing and more accessible for some people to talk behind the screen. As a grandma said, "I also think being online is an unthreatening, safe environment to share, learn, and converse with other parents and grandparents" (P2).

Limitations of The Virtual Class Delivery

Interestingly, six out of eight (75%) also think virtual is a limitation. Compared to in-person education, parents miss the feeling of closeness and connection from in-person relationships. Feedback from a father illustrated these two limitations: The **difficulty of online interaction** without observation of body language and the **lacking of close connectivity** in the absence of in-person dynamic:

I think it is sometimes difficult to know how to interact online. When you are in person with body language, you know when to speak and when you should stop... Maybe the fact is that in-depth sharing is a little more unnatural online than in-person. (P 4)

Nevertheless, all participants agreed that the positives outweighed the negatives. Figure 4.4 visualizes parents perceived strengths versus limitations of virtual access.

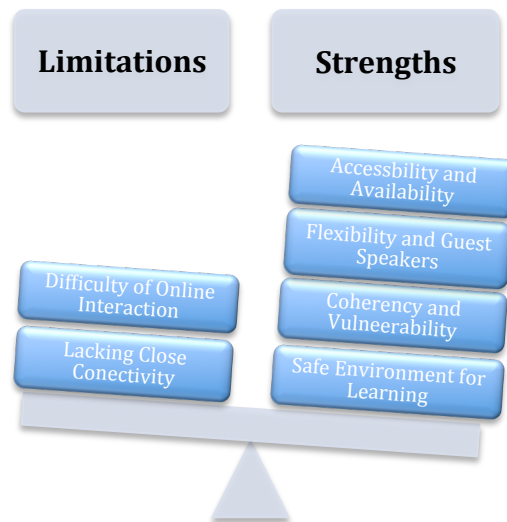


Figure 4.4: Virtual Strengths vs. Limitations

Strengths of The Educator and The Courses

In addition, even though the main focus of this theme is the strengths and limitations of the virtual synchrony setting, a well-prepared educator and well-prepared courses are two

additional strengths that cannot be neglected because every participant (100%) mentioned their importance:

Well-Prepared Parent Educator. The parent educator's effort and competency appeared to be a critical strength that promised the program's quality. The teacher's personality characteristics were considered essential to participation and retention. As a grandma emphasized, "A very big strength is to have a well-educated teacher.... I can tell your personality is perfect for this type of education"(P 2). Furthermore, Participant 1, who successfully recruited five friends to the program, indicated:

I just so appreciate your class! You have done a really great job. You can tell it is well researched, and you put much into it. If you had not done a great job, I would not be able to come around these people [into the class]... because asking people to give up time is hard. Obviously, I said it is worth your time. So you did that.

Well-Prepared Courses. Meeting the parents where they were and building the teaching contents and instructions upon their previous experience and their current family situations were perceived as greatly helpful to the participants. A mother shared, "The top strength is that you took time to interview us before the course to tailor it to our needs. I think that is magnificent... you have touched on the subjects by tailoring it, and it feels very personal" (P 7). This feedback functioned as more evidence for the strength of the ECFE-like model, wherein curriculum and lesson plans were tailored to meet the needs of the local families and communities.

A well-prepared facilitator and well-prepared courses were intertwined to ensure the program's quality. However, it is unlikely that the courses could be well prepared without a competent parent educator and good teaching content and andragogy instruction resources. Since the preparation for virtual classes is different from in-person lessons, it is necessary to take close

consideration of the participant's perceived indicators of a well-prepared parent educator and well-prepared courses.

Theme V. Suggestions for Improvement

Participants took time and energy to brainstorm numerous ideas to assist the program's growth, such as class size, group discussion organizations, classroom time management, and marketing and outreach. Some advice was applied to the current class, while others were suggested for the program's future development. For example, one particular idea of providing childcare in in-person sessions was exhilarating to the parents who have toddlers. This feedback indicated the need for *two-generational* family education, one of the signature strengths of the ECFE model that was not available at E³PE yet. The participants suggested a call for the program to carry out the *two-generational* education in the next step of the program development and establishment.

Overall, for the purpose of this study, only six strategies for the improvement of the pilot virtual synchronous group-based E³PE program are included in this theme:

- Setting in-person meet-up opportunities for virtual classes after COVID-19.
- Offering both virtual and in-person groups to meet the different needs of families.
- Providing classes to spouse/co-parenting partners so they can stay on the same page and inspire cooperation.
- Offering classes to pregnant parents to help them build “a team approach” from the beginning.
- Adding grandparent class.

- Providing childcare for in-person sessions will attract more participants. Two-generational family education was perceived as in need for families with children under five years old.

Chapter Summary

According to the interview respondent testimony, five themes were identified regarding participants' experiences with the virtual synchronous group-based parent education program: *motivation, impact, challenge, strength and limitations, and improvement*. *Motivation* explored the intrinsic drive of the parents and the necessary conditions that attract them to participate in the parent education program. *Impact* evaluated the changes in the participants after taking parent education classes, whether their children changed, and the connection between the changes in parents and their children. *Challenge* examined the difficulties for the participants to practice and maintain the implementation of the new knowledge/skills in parenting. *Strengths and limitations* discussed the participant perceived advantages and disadvantages of the virtual synchronous group-based program concerning meeting the needs of their learning. *Improvement* surveyed the suggestions from the participants based on their first-hand experience to assist in making this virtual program better support parents and families.

In summary, Chapter Four presented the results from qualitative data analysis with rigorous respect for the participants' perspectives through exercising a significant amount of In Vivo codes and direct quotes. In the next chapter, further interpretation of the results and recommendations for field implication and future research on the topic will be discussed.

CHAPTER FIVE: DISCUSSION AND RECOMMENDATIONS

As stated in Chapter One, the purpose of this study was to evaluate the impact of a pilot virtual synchronous group-based E³ Parent Education (E³PE) program as a proactive strategy to strengthen parents' capacity to build a *nourishing family environment*. In Chapter Two, a comprehensive literature review investigated research findings regarding the effect of in-person parent training (PT) programs, the strength of ECFE as a unique government-funded family education service, and barriers to PT participation, retention, and implementation. Also, studies on technology-based PT were intensively explored and included the most recent information relative to online/virtual parent education during the COVID-19 pandemic.

Chapter Three explained the research design. A qualitative methodology approach was implemented to understand the perspectives about how participants' virtual parent education experience influenced/changed themselves and their parenting, their children, and their families. Mixed coding methods were used during the four-step data analysis procedure: first-cycle coding, second-cycle coding, categorizing, and theme theorizing. The results were presented in Chapter Four, wherein five major themes were constructed based on the participants' stories and processes.

In this chapter, the research questions will be discussed in connection with the interpretation of the results from the data analysis. Implications and recommendations will be explored to assist the development of practitioners and program developers, provide information for policymakers and leaders, and contribute practice-based insight to the academic scholarship regarding professional preparation and future research on the topic. Moreover, the strengths and limitations of the study will be discussed. In addition, the researcher's self-reflection will share a few personal experiences about how the researcher has been affected by the project.

Research Question Discussion

Chapter Four presented the five major themes identified through a carefully designed four-step data analysis: *motivation, impact, challenges, strengths and limitations*, and *suggestions for improvement*. Theoretically, *a nourishing family environment* could minimize toxic conditions and nurture children's healthy and successful development; parents and primary caregivers need skills and support to build *a nourishing environment* (Biglan et al., 2012). The two research questions were designed to evaluate whether the pilot virtual synchronous E³ Parent Education program (E³PE) was feasible and effective in empowering the parents with the essential skills and providing efficient support that the families needed.

The first research question was addressed by *motivation, impact, and challenges*, which focused on how parents considered attending E³PE, how their learning fostered changes within the family that ultimately led to a *nourishing environment*, and what were their struggles during this process. The last two themes, *strengths and limitations*, and *suggestions for improvement*, responded to the second research question, which extended the theory by exploring the parents' perspectives on how E³PE can better support them in building and maintaining *a nourishing family environment*.

Discussions for Research Question One

As discussed in the literature review, the perspective of Szapocznik et al.'s (1989) structural family systems assumed that changing functioning in one family member will automatically lead to change in another family member (Acuña & Martinez 2018). What happened to the participants in this study regarding this chain of changing dynamics? Motivation, impact, and challenges are three inseparable folds of how the virtual E³PE experience changed parents and parenting and, in turn, changed their children and influenced the

families. Each of these factors has a specific role yet acted inter-dependently in the impact of the E³PE program, and therefore addressed **Research Question 1: *What is the impact of the virtual group-based parent education on the participants in terms of strengthening their ability to build a nourishing environment for their children's development and learning?***

Theme I: Motivation

The interviews discovered that besides parental love as intrinsic motivation, “A Good Fit” among needs to learn, a friend recommendation, low time commitment, and easy and free access is a key condition that allowed parents to participate. Learning about participants’ motivation is critical to strengthening the program’s ability to build a learning environment for the families in the future. Participants sharing their reasoning for a good fit showed how they considered attending. In this case, it appeared that the virtual synchronous delivery format played a vital role in making *a good fit* into reality and increased learning opportunities for these participants.

Changes are unlikely to happen without motivation to learn and make the changes. Connecting to the literature review, this finding of *motivation* is partially in alignment with what Vilches et al. (2021) discovered: some parents were mandated, and some were motivated by the need to learn; however, a significant difference is that none of the parents in this study was mandated. This could be an encouraging sign of shifting the stigma about parent education in Montana culture (PBS NewHour, 2021). Also, since the participation rate was reported as extremely low for in-person programs (Viola et al., 2020; Andersson et al., 2019), the discovery of the *motivation* in this study encouraged further exploration of whether virtual synchronous course delivery will strengthen the E³PE program in creating *a good fit* for families in other communities in Montana.

Theme II: Impact

Impact on Parents. The significant impact on parents was demonstrated through several reported improvements: *Self-care and self-love, parenting capacity and confidence, and feeling supported*. In comparison, these results agree with much field research on the short-term effectiveness of in-person parent education (Acuña & Martinez, 2018; Dretzke et al., 2009; Hall et al., 2007; Stewart-Brown et al., 2004). In other words, virtual synchronous classes could have a similar impact on the parents as in-person programs, including but not limited to better mental health and self-efficacy, increased parenting knowledge/skills, and improved parent-child interaction and closer relationships with their child.

Connecting back to the theoretical perspective of structural family systems, when changes in parents and parenting functioning happen, changes in another family member, in this case, the child, will automatically follow (Szapocznik et al., 1989). This concept applies to the impact circle of the E³PE program. The following section will discuss the parents' reports of the changes in the children.

Changes in Children. Participants' observations indicated that the impact on parents and parenting led to tangible positive outcomes in children, including *better attitude, improved behavior, and increased ability*. Parents were role models for their children and intentionally or unintentionally passed learned skills/tools to them. This connection was in tune with numerous research about PT as prevention of student mental problems and behavioral issues (Akin et al., 2017; Bekkema et al., 2008; Gonzalez & Willaba, 2018; Singh et al., 2019; Waters et al., 2020; Zubrick et al., 2005). Notably, these observations deepened the understanding of structural family systems applied by a previous study discussed in the literature review: "It is believed that a change in parent behavior will lead to a change in child behavior" (Acuña & Martinez, 2018, p.

7). Hence the evidence could be seen as an extension of the inseparableness between parenting and outcomes in children and further proved the principle that children's successful development is rooted in parenting and the family environment.

This demonstration of the changing chain within the family inspired further inquiry involving the spouses/partners of the participants. Since each parent's functioning change automatically impacts the children, the participants' learning from E³PE also changes co-parenting partners and relationships with their spouses.

Impact on Spouse Relationship. One of the findings is a little surprising with its notable statistical significance. Changes in parents automatically influenced their spouses and improved the couple's relationship. Participants reported that sharing what they learned from the classes with their spouses helped them grow in parenting and increased their understanding of each other. They had fun learning together and improved their relationship. This is a new area not being discussed in the literature reviewed because research that involved spouses/partners focused on the impact on children only (Enebrink et al., 2012). Further study will be helpful to reveal more information, for example, exploring the comparison of the impact when one or both of the parents attend; to what degree does the spouse/partner relationship and their interactions ultimately impact the child, and investigating for an exact formula between the engagement of parenting partners with the presence of a nourishing family environment.

Influence on Family. Consequently, from the vital connections between the impact on parents to changes in children and spouse, participants reported "A Calmer Household" wherein there is more understanding, more harmony, and fewer challenges/battles— *a nourishing family environment*. This ultimate result is entirely in alignment with the outcome of multiple studies on in-person settings (Bennett et al., 2013; Giannotta et al., 2013; Russo et al., 2020), which serves

as critical evidence to address the first research question: *The virtual synchronous group-based E³PE program generated a significant positive impact on the parents and their parenting and strengthened their capacity to build a nourishing family environment for their children's development and learning.*

Theme III: Challenges

The three most common challenges for participants to practice and employ the newly learned skills are a busy, stressful everyday life and difficulties breaking old habits and building new behavior patterns. There was an “unstable wave” for the implementation during the week, but parents will be recharged through the following Monday’s class. In contrast to PT programs that provided only seven to 19 sessions (Furlong & McGilloway, 2015; Karjalainen et al., 2021; Lundahl et al., 2005), where the long-term effect was hardly maintained due to relapse, this program provides ongoing support to the participants thus enabling them to buffer from relapses and encouraging baby-steps forward. This discovery extended the literature regarding the unique strength of the ECFE model as an ongoing service (up to 5+ years) to support families. It contributed to the problem-solving for maintaining the positive outcomes in parent education.

Additionally, a grandparent in the group expressed a personal challenge for her to open up during group sharing. She believed that grandparents do not have the same rights as the parents when talking about the grandchildren. This privacy concern became an obstacle to her continuing participation in group learning. The research review has not found relevant information regarding this topic yet, and future research will help gain more understanding.

Discussions for Research Question Two

Once the impact of the E³PE on strengthening the parents to build *a nourishing family environment* is demonstrated, the next necessary step is to learn the participants’ perspectives

about how to improve the program to support the parents in maintaining and growing the nourishing environment. The second research question was designed to find the answers, and the last two themes, *strengths and limitations* and *suggestions for improvement*, lead to the **Research**

Question 2: What are the strengths and limits, and how to improve the virtual program?

Theme IV: Strengths and Limitations

Every participant (100%) believed the virtual synchronous is an intense strength because of its convenience, namely, the universal accessibility. This matched the findings from multiple studies on international trends regarding using technology to increase accessibility (Bearss et al., 2017; Clarkson & Zierl, 2018; Enebrink et al., 2012; Kobak et al., 2020; Sanders et al., 2014). Subsequently, the virtual accessibility allowed more flexibility and arrangement of guest speakers, increased coherency and vulnerability when friends from a distance could join together; it also provided a safe learning environment during COVID-19; some participants indicated it was easier to talk online rather than in-person.

Six participants (75%) also felt that being virtual has limits due to the difficulty of online interactions and lacking close connectivity compared to in-person. The findings supported the report in a study by Bears et al. (2017). It also added more evidence to the discovery by Vilches et al. (2021) that adapting to virtual/online classrooms requires educators to adjust pedagogy/andragogy to effectively manage group learning and discussion with appropriate interpretation of the nonverbal cues. This served as an indicator for parent educator competency regarding virtual synchronous instructional skills.

A well-prepared educator and *well-prepared courses* are additional necessary strengths identified by all participants. A top strength is that the educator tailored the course to meet the specific needs of the families, and the parent educator's personality matters. The particular

importance of this finding is twofold: it demonstrates the effectiveness of the ECFE model that employs a licensed parent educator who tailors the curriculum and lesson plans to meet the needs of local families and communities; it also highlights what Behhema et al. (2008) suggested that characteristics of the individual professional facilitators are critical. Furthermore, the surveys of parent educators (Walker, 2021) indicated that relationship building was a major challenge in facilitating effective learning when ECFE adapted to virtual classrooms during COVID-19. This reflection raised a question in the field: *How to define the competency of the practitioners delivering virtual synchronous group-based parent education programs?*

Theme V: Suggestions for Improvement

To contribute to the improvement and growth of the program, participants brainstormed numerous practical strategies, including but not limited to the following: arranging midterm and end-of-semester meet-ups to provide in-person networking opportunities; offering both virtual and in-person classes to meet the different needs of families; providing partner classes particularly for pregnant parents to help them build an early foundation for a *teamwork approach*, and providing childcare for in-person sessions.

This feedback specifically highlighted two more strengths of the ECFE model: both in-person and online/virtual classes are available; two-generational education is emphasized, and children are educated in separate classrooms for in-person sessions while parents attend parenting classes in a nearby room (MNAFEE, 2015). Participants' advice indicated the needs of the local families and outlined the direction for the next stage of the E³PE program establishment— *The policy and funding support provided by the policymakers and educational leaders in the community is the key to the implementation of this stage.*

Research Question Discussion Summary

The qualitative methodology emphasized the process and captured the nuances of changes to construct the major themes. Through the discussions, the researcher interpreted the themes to address research questions in conjunction with the information found through the literature review and illuminated six key messages:

- *“A Good Fit”* between needs to learn and access to the resource is a crucial motivation. The virtual free platform provides universal, equitable accessibility and lowers barriers to participation.
- E³PE program made a significant positive impact on participants. It led to tangible, desirable outcomes in children and improvement in spousal relationships, which resulted in *“A Calmer Household”– a nourishing family environment*.
- The immediate effectiveness of virtual synchronous parent education could be similar to in-person settings. Parent educator competency and well-prepared courses are the foundation for the program’s quality.
- Common challenges for practicing newly learned parenting skills are a busy and stressful everyday life, difficulty breaking old habits, and building new behavioral patterns.
- Ongoing group-based parent education provides continuing support to parents, so participants that attended more sessions showed better abilities to cope with challenges.
- An ECFE-like model proved influential, particularly in employing licensed parent educators and tailoring the courses to meet the needs of the local communities and the families. Two additional ECFE characteristics suggested by the participants are offering in-person and virtual opportunities and providing childcare (two-generational education) for in-person sessions.

Based on the six key messages, implications and recommendations are proposed to three sectors that determine the direction and the fate of the parent and family education system.

Implications and Recommendations

The results from this study and the integration with information gathered from the literature review walked hand-in-hand to inform implication. Teamwork among professionals and government agencies is essential to make a reality of universal, equitable free access to highly effective parent education. Below are several recommendations for the practitioners and program developers, policymakers and educational leaders, and the field of academic scholarship.

For Practitioners and Program Developers

Based on the data analysis of this study, a virtual synchronous program could be as effective as in-person settings, and parent educators' competency and preparation for the courses are the foundation for the program's quality. It is imperative to create the condition of "*A Good Fit*" between families' needs to learn and the universal accessibility when designing the program to motivate participation. Based on the findings from this study and the literature reviewed, to create *a good fit* might mean that program developers and practitioners must understand the needs and desires for delivery format, tailor content topics that best meet the interests of the potential target parents, and ensure the outreach channels and materials are reaching participants in an impactful way. For instance, participants in this study were self-motivated parents who were more likely to engage in learning because the courses met their needs for improving skills to manage an average daily parenting situation; easy and free access to the virtual synchronous classes so they could attend the classes at home without transportation was the critical element for *a good fit* for them.

Furthermore, the andragogy for virtual settings is different than in-person, wherein body language is absent and nonverbal cues need to be interpreted for communication. Building group coherency and a sense of community requires well-prepared instructional strategies and designed virtual teaching materials. In addition, technology skill training is essential to help the practitioners get familiar with multiple tools for class delivery.

For Policymakers and Educational Leaders

Evidence from this study and comprehensive research review demonstrated that parenting education is effective as universal prevention for ACEs and behavioral issues in children/students. An ECFE-like model is shown to be effective in including competent licensed or professionally trained parent educators who tailor the courses to meet the needs of families and provide free access to virtual synchronous classes, lowering the barriers to participation.

Another three characteristics of ECFE suggested by the participants are offering in-person and virtual/online opportunities, classes to different groups such as pregnant parents, partners, and grandparents, and a two-generational education design providing childcare for in-person sessions. It is advised to carry these strengths out in the next step of E³PE implementation. Policy and funding support is vital to program implementation and replication. Government investment in parent education not only creates a nourishing environment in families, schools, and communities but also saves billions of dollars of tax money considering the annual return of investment, eliminating the cost due to the lifelong negative impact of ACEs (CDC, 2021; UNICEF, 2022).

Recalling the literature review, government-funded parent education programs in many nations throughout the world (e.g., Australia, Finland, Ireland, Sweden, and The United Kingdom) promote *a nourishing family environment* for children's successful development

(Behhema et al., 2008; Enebrink et al., 2012; Furlong & McGilloway, 2015; Harrison & Vliet, 2013; Karjalainen et al., 2021; Kobak et al., 2020; Sanders et al., 2014; Singh et al., 2019; Zubrick et al., 2005). In the face of America's crisis of ACEs and K-12 student mental problems and behavioral issues and the challenges for many parents in participating in in-person settings, it is advised that policymakers and educational leaders at the federal, state, and local community levels promote virtual synchronous group-based ECFE-like parent education alongside in-person programs to support families' different needs.

Government funding and policy support are the determining factors for the further development and implementation of the E³PE program. Also, the availability of ongoing professional training for the practitioners is vital to the continuing improvement of the program. It is essential to provide compensation to the teachers and administrators to ensure the sustainability of a stable, high-quality program.

For Academic Institutions Offering Parent Educator Preparation Programs

Higher education institutions offering professional training for the future and current parent education practitioners are responsible for using up-to-date research to inform and improve real-life practice. The research and literature review showed the increasing need for virtual synchronous group-based parent education to expand accessibility. Meanwhile, the competency of the parent educators facilitating virtual/online classes has differences from teaching in-person regarding instruction and virtual classroom interactions; therefore, for academic institutions with parent educator preparation programs, it is recommended that they consider redefining parent educator competency indicators and adding more training for technology skills and virtual/online instructions.

Furthermore, it is imperative to customize the ongoing support and continuing professional development with real-life practice problem-solving. For instance, this study showed the limits of virtual platforms regarding the difficulty of online/virtual interaction. Academic scholars must work with practitioners to investigate practical strategies or invent special tools to improve virtual interaction and community building.

For Future Research

Reflecting on the research results, several new topics could be considered for further research. First of all, the perspectives of the spouse/partner of the participants regarding the impact of the virtual synchronous program are not studied yet, and their perspectives and observation will add much value to the whole picture of program evaluation. Secondly, the challenge of breaking an old habit and building new behavioral patterns in parenting needs to be explored; more data and in-depth understanding can assist in exploring pathways to support the parents better. Lastly, the difference in perceived rights between grandparents and parents is worth diving into because the findings may be helpful in appropriately engaging grandparents in groups mixed with parents and grandparents.

Strengths and Limitations

A key strength of this study lies in the existing trust and close relationship between the participants and the researcher, who is also the lead developer and facilitator of the E³PE program. The connection made the interview process smooth and comfortable; participants shared their stories and expressed their feelings and perspectives freely. Also, because the researcher conducted the whole process from interviews to video transcripts and coding and data analysis, it helped understand participants' language better and capture the nuances. Moreover, the demographic of the sample is diverse in age, childcare role, home location, and cultural

background. In particular, it could be one of the very few qualitative studies on participants' experience in a parent education program initially designed for a virtual synchronous group-based format and serves families with children from birth to school age in the United States.

The study's limitations include the small sample, absence of a control group, and the similar background of the participants' educational level and social-economic status. All participants are from middle-class families, and each has a B.A. or master's degree. This is a disadvantage because some groups with lower education or low-income level might need more parenting support, and whether this program could be adequate for those populations is uncertain. Lastly, the fact that the researcher is the program developer and the class facilitator might be an obstacle for the participants to share some negative opinions.

Researcher Self-Reflection

Several times during working on the interview video transcriptions, the researcher had to pause to process the surging emotions and sometimes could not help to let the tears flow...

It was extremely rewarding to listen to all of the positive and dramatic changes in the parents, especially in their young children.

It was exhilarating when I discovered a mother made daily breathing and meditation practice as her New Year's resolution, and her whole family adopted the routine of weekly meditation nights, including a three-year-old little boy.

It was profoundly touching when witnessing how much effort the parents committed to learning, driven by love for their children,

Moreover...

It was painful to know that the parents thought they needed permission from the parent educator to do self-care and release the guilt and feeling of selfishness.

It was challenging to realize that parents struggle with an everyday busy, stressful life without much support from society.

Particularly, hearing parents say being in the group helped them "feeling not alone" and "a sense of community" hit the researcher's heart – parents need not only knowledge and skills but parents also need ongoing support.

*It takes a village to raise a child.
And “Family education is not a privilege, but a right.” – Susan Walker.*

All of these experiences had a remarkable influence on the researcher, which deepened an understanding of the families and prepared for approaching more families in the future. The incalculable value of this learning process not only informed specific directions to improve the current E³PE program in Whitefish but also inspired the researcher to advocate the program to the leaders in other communities in Montana. Educating children is a shared responsibility between families, schools, and society. Every parent and family deserves equal free access to high-quality parent education tailored to meet the family situations.

Conclusions

This research was set up to explore the impact of a pilot virtual synchronous group-based E³ Parent Education (E³PE) program regarding its accessibility and effectiveness in strengthening parents’ capacity to build *a nourishing family environment*. Beyond a complete alignment with the perspective of structural family systems (Szapocznik et al., 1989), wherein functioning changes in one family member automatically change another member, the discoveries from this research further discovered the seamless connection between changing in one parent and the outcome of *a nourishing family environment*.

Participants’ reports demonstrated the effectiveness of the E³PE program. Its ECFE-like model made a significant positive impact on parents and their parenting and, in turn, led to tangible, desirable outcomes in children, improved spouse relationships, and resulted in a more nourishing environment for the children’s successful development and well-being of the whole family. Specifically, the free virtual synchronous platform could be a solution to enable equitable universal accessibility and lower barriers to participation, particularly for parents who have school-age children.

Bridging research to practice is placed at the center of this study. The findings will be incorporated to improve, expand, and replicate the E³ Parent Education (E³PE) program to empower parents and strengthen families in Whitefish and other communities in Montana. The themes co-constructed between the participants and the researcher through a qualitative methodology contributed meaningful data to fill the field research gap.

“Parent education is the pathway to healthier children, parents, families, and safer and more prosperous communities” (NPEN, 2021). Universal prevention through parent education is the active response to fostering *a nourishing family environment* for the successful development of children and the well-being of the whole family. Highly effective virtual synchronous delivery as an additional option or possible alternative to in-person settings provides more accessibility to parent education. Nonetheless, government policy and funding that promotes equitable universal access to quality programs facilitated by competent practitioners are critical to addressing America’s crisis of ACEs and breaking the cycle of its negative impact from early childhood to K-12 schools, from youth to adults/parents, and then the next generation.

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APPENDIX A: University IRB Approval



TO: jinagy@csp.edu
CC: Humans Subjects Review Committee File

The IRB Human Subjects Committee reviewed the referenced study under the exempt procedures according to federal guidelines 45 CFR Part 46.104d (2): RESEARCH THAT ONLY INCLUDES INTERACTIONS INVOLVING EDUCATIONAL TESTS (COGNITIVE, DIAGNOSTIC, APTITUDE, ACHIEVEMENT), SURVEY PROCEDURES, INTERVIEW PROCEDURES, OR OBSERVATION OF PUBLIC BEHAVIOR (INCLUDING VISUAL OR AUDITORY RECORDING).

Study Number: 2021_100
Principal Investigator: Yu Jiang
Title: A Qualitative Study of The Impact of A Pilot Online Group-Based Parent Education

Classification: Exempt Expedited Full Review

Approved

Approved with modifications: [See attached]

Declined [See attached]

Upon receipt of this letter, you may begin your research. Please remember that any changes in your protocol need to be approved through the IRB Committee. When projects are terminated or completed, the IRB Committee should be informed in order to comply with Department of Health and Human Services (HHS) Regulations, Title 45 Code of Federal Regulations Part 46 (45 CFR 46). If you have questions, please call the IRB Chair at (651) 641-8723.

Signature, Chair Human Subjects Review Committee

November 9, 2021
Date

APPENDIX B – Table 1.1: Similarities and Differences Between PTP and ECFE

Table 1.1: Similarities and Defferences Between PTP and ECFE		
	PTP	ECFE
Similarities	Universal: Open for all families	
	Accessible: No fees mandated	
	Practical: Low-cost group sessions; low-dose weekly classes	
	Accountable: Scitific research-based information	
	Quality: Licensed Parent & Family Educator	
	Use ECFE Core Curriculum Framework for Lesson Plans	
	Teaching focous on five domanis: Parent development, Child-development, Parent-child relationships, Family-development, and Cultrue & Community	
Differences	Parent only classes	Three parts included in each session: families-together time, parent class, and child class .
	For families with children 0-18	For families with children aged 0-5
	1-hour session	2.5 hours for in-person sessions; 1hour for online sessions
	Virtual sessions only	In-person mainly; a few online/virtual
	No childhood teacher	Licensed childhood teacher
	Only in Whitefish, Montana	Statewide program in Minnesota
	Provided by individul parent educator	Destributed through public school system
	Hourly pay (or volunteer without payment) for the parent educator	Parent educatosr in most districts are full timeand included in the teacher contract
	Resources from the parent educator's individual network	District teamwork accross multiple sectors of the community resources
	The parent educator takes all works	Porgram administration team

APPENDIX C – Table 3.1: Participant Demographics Information

Table 3.1: Participant Demographic Information								
Participant	Sessions Attended (By The Time of Interview)	Ethic Background	Education Level	Marrage Status	Home Location	Child-Care Role	Number of Children	Children/Grandchildren Gender and Age
P1	27	White/Caucasian	B.A.	Married	Whitefish, MT	Stay-home mother	3	Boys: 3, 5, 7
P2	18	White/Caucasian	Masters	Married	Whitefish, MT	Retired grandmother	2 Adult children, 4 grandchildren	Boys 2, 7; Girls 4, 6
P3	18	White/Caucasian	B.A.	Married	Bozeman, MT	Stay-home mother	2	Boys: 5, 8
P4	19	White/Caucasian	B.A.	Married	Missoula, MT	Work-at-home father	2	Boys: 4, 7
P5	8	Asian/Chinese (First generation immigrant)	B.A.	Married	Whitefish, MT	Retired grandmother(Not playing childcare role due to living distance)	4 Adult children, 3 grandchildren	Boy:1; Girls: 2, 3
P6	11	White/Caucasian	B.A.	Married	Whitefish, MT	Full-time working mother	2	Boy: 4; Girl: 7
P7	11	Latino Decent	B.A.	Married	Whitefish, MT	Stay-home mother	1	Boy: 6
P8	9	White/Caucasian	B.A.	Married	Whitefish, MT	Part-time working mother	3	Girl: 2; Boys: 6, 8

APPENDIX D – Participant Information Letter

Dear Participant,

During the 2021-2022 school year, in the parent education program, I will be conducting academic research. I am conducting this research as a requirement of completion of my Master of Arts in Educational Leadership degree from Concordia University – St. Paul. As parents/grandparents in my parent education classes, I am inviting you to participate in this study.

Research aims to improve knowledge on an educational subject; in this case, the subject is parent education. In other words, I am looking to measure what is the impact of online, group-based parent education.

To participate in this study, I will ask you to participate in one-on-one interviews with me as the interviewer. You will be interviewed one or two times during and/or after the Fall 2021 sessions. This study will last approximately 16 weeks. No additional work is required by you to participate in this study.

Your participation is **not** required in this study, and you may withdraw at any time prior to the conclusion of the study. Your participation, whether you choose to or not, will not have any impact on your parent education learning experience.

The data from this study will be used to improve the parent education practice to support families both in our local community and possibly many other communities as well.

None of your personal information will be collected in the process of this study. No names or identifying data will be included in the final publication of the thesis. A coding system will be used to replace participant names and/or identifying information to protect your privacy.

Before signing, I ask you to make sure that you're willing to volunteer in this study. You may withdraw from the study at any time before the results of the study are projected.

Upon concluding this study, you will receive a copy of the results via email, if you so choose. Hence, the consent form on the next page asks you to list your email if you would like to receive the results.

If you have any questions or concerns, please feel free to contact me by email or phone. If you have any questions not answered by me, the researcher, you may contact my program coordinator, Dr. Oluwatoyin Akinde Fakuajo, at akindefakuajo@csp.edu.

Sincerely,

Yu Jiang
218-240-5975
jiangy@csp.edu

APPENDIX E – Consent Form

Title of Thesis: The Impact of Online, Group-based Parent Education: A Qualitative Study

Name of Researcher: Yu Jiang

Please provide your initials for the following statements and sign your name on the line at the end.

By providing my initials and appending my signature, I affirm that I have read and that I understand the information provided to me about the referenced study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

Initial of Participant:

I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.

Initial of Participant:

I understand that the one-on-one interview that I will participant in will be used for the study.

Initial of Participant:

I agree to take part in the above study.

Initial of Participant:

If you would like to receive the results of the study after it is completed, please note your email address below:

Email:

Name of Participant _____

Signature of Participant _____ Date _____