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Parenting in Egypt:

Recommendations for a Parenting Program for Upper and Middle Class Egyptians

Amira Ragy S. Hanna

The American University in Cairo

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Abstract

Parenting is key for the healthy development of children. It is a complex role that requires a great deal of support. Parenting or parent education programs are good tools for supporting parents but they are not widely available in Egypt, and the ones that are available may not be culturally sensitive to the Egyptian context. In order to develop an effective parenting program, an assessment of parenting training and support needs was conducted. An online survey was administered to parents ($n = 255$, 47% completion rate) of children aged 0 to 12 to assess their knowledge of child development, their parenting and disciplining style, their perceptions of their strengths and struggles as parents, and their interest and needs in a parenting program. The participants exhibited some knowledge of child development with various gaps and misconceptions. Their parenting styles were inconsistent with discipline a mix of lax and harsh practices. They saw their strengths as lying in loving and educating, and identified challenges with discipline. They also expressed interest in participating in parenting programs. Suggestions for developing parenting programs in Egypt are made based on these results. Further research is required to better understand Egyptian parenting in order to provide appropriate support for their own and their children's wellbeing.

Keywords: parenting, parenting style, knowledge child development, parent development theory, parenting program, parent education, Egypt

Parenting in Egypt: Recommendations for a Parenting Program for Upper and Middle Class Egyptians

Parenting does not necessarily refer to the role of the biological parents of the child but rather to the child's primary caregivers. Parenting is an ongoing dynamic process in which a parent or other primary caregiver behaves in a manner that affects the child's development (Fox, 1994). In simple words, parenting, as is apparent from the word, is how parents raise their children. It is the process of childrearing and supporting a child on all possible aspects; physically, emotionally, psychologically, and cognitively from birth and throughout infancy, childhood, adolescence and up to the onset of adulthood. It is an active relationship between parents and children and it changes according to the characteristics, genders, and ages of the children (Smith, 2010).

The Importance of Parenting

There is increased attention on parenting and a pressing need for parenting education due to the rise of child abuse, parental neglect, children's behavioral problems, delinquencies and crimes (Taylor, Spencer, & Baldwin, 2000). Research has shown that bad parenting has tangible adverse effects and that good parenting is of utmost importance to children's health. There is a positive correlation between bad parenting and child abuse, and the lack of positive parenting leads to social, emotional and intellectual problems in children (Seay, Freyestinson, & McFarlane, 2014). Inadequate parenting skills have been shown to be a risk factor for child maltreatment and violence against children (Belsky, 1993; Tolan, Gorman-Smith, & Henry, 2006); parental styles that depend on overprotection or rejection have been shown to increase childhood anxiety (Young et al., 2013); harsh and negative parenting is strongly correlated to children's depressive symptoms (Dallaire et al., 2006); and laxness or overreactivity increase

child aggression (Del Vecchio & O'Leary, 2006). On the other hand, good parenting has a positive influence on the quality of children's development, it promotes parents' general welfare and wellbeing, and maintains a general healthy family environment, which in turn is related to children's resilience and risk factors (Samuelson, 2010). Hoghghi (1998) explains that "parenting is probably the most important public health issue" that society is facing and that it is "the single largest variable implicated in childhood illnesses and accidents; teenage pregnancy and substance misuse; truancy, school disruption, and underachievement; child abuse; unemployability; juvenile crime; and mental illness" (p. 1545). These problems do not only affect childhood and adolescence, but are also determinants of problems in adulthood (Hoghghi, 1998).

There is a body of research on the effect of parenting and parenting styles and practices on specific developmental outcomes in children. Parenting affects most aspects of children's development such as cognitive development, emotional regulation and social- emotional development, and academic achievement. For example, research has shown that having a supportive mother or father or both has a positive impact on child cognitive development (Ryan Martin, & Brooks-Gunn, 2006); that parent child interactions and maternal sensitivity and autonomy-support are related to children's brain development and executive functioning (Bernier, Carlson, & Whipple, 2010); that parental involvement and follow-up has a positive effect on children's IQ and academic achievement (Englund, Luckner, Whaley, & Egeland, 2004); that the quality of parents' involvement with their children is what improves their academic achievement (Pomerantz, Moorman, & Litwack, 2007). Besides having a positive effect on children's academic achievement, parents' involvement has been shown to have a positive effect on children's emotional adjustment and functioning (Cheung & Pomerantz, 2011);

parental involvement positively impacts children's behaviors, social skills, and social functioning (El Nokali, Bachman, & Votruba-Drzal, 2010); positive and supportive parenting has been negatively correlated with children's depressive symptoms (Dallaire et al., 2006); and it also has been shown to have a great impact on the child's overall mental health (Patterson et al., 2002a). Specific parenting characteristics may predict child behavioral outcomes. For example parental warmth as well as quality communication between parent and child is related to lowering a child's behavioral and externalizing problems (Caspi et al., 2004; Denham et al., 2000; Patrick et al., 2005) and to early childhood conscience and cooperation (Kochanska & Murray, 2000). These effects last long into adulthood and are even repeated in future generations since individuals are likely to parent similarly to the way they were parented (Smith, 2010). So proper parenting is essential for having healthy societies since it plays a key role in having healthy toddlers, children, and adolescents who grow into healthy adults.

What is Good Parenting?

How can a parent decide how to raise a child? Defining good parenting is very difficult and parenting literature provides a variety of definitions and attributes of positive or good and poor parenting. There are many studies that attempt to define good parenting and several parenting theories that define the various aspects of parenting.

Seay et al. (2014) reviewed 120 studies/articles on parenting in the fields of "education, nursing, sociology, psychology, and child health and development", chose a total of 18 qualitative and quantitative studies, and then suggested a definition for positive parenting, which they see as continuously maintaining a relationship with the child that is characterized by: caring, leading, providing, teaching, and communicating. Other examples of good parenting attributes include: teaching by example, love and affection, maternal presence, flexibility, control and limit

setting (Taylor, Spencer, & Baldwin, 2000), sensitivity and responsiveness, empathy and child-centeredness (Smith, 2010). As for attributes of poor parenting, they include: excessive control and discipline, lack of attachment and warmth, hostility and aggression (Taylor, Spencer, & Baldwin, 2000).

Research has shown that good parenting practices take into consideration the child's individual personality/characteristics and varying developmental needs (Krochek & Mowder, 2012; Mowder, 2005). Eve, Byrne, & Gagliardi (2014) researched the meaning of good parenting by interviewing and surveying parenting capacity assessment professionals and came up with six main categories of good parenting; 1) insight (awareness of one's individual child and one's capacity as a parent, especially limitations) , 2) willingness and ability (one's motivation and capability to parent), 3) day-to-day versus complex/long-term needs, 4) putting child's need before own needs (child-focused parenting including sacrifice and protection), 5) fostering attachment (one's sensitivity and focus on bonding and nurturance), and 6) consistency vs. flexibility (one's ability to provide consistent and stable parenting while being open to change and advice).

Besides these studies, there are several theories of parenting, addressing its various aspects. In this study, Baumrind's Parenting Typology (Baumrind, 1965, 1966, 1967, 1968, 1971, 1991); and Mowder's Parent Development Theory (PDT) (Mowder, 2005) were used because , Baumrind's Parenting Typology covers various disciplining and parenting styles and has been addressed in studies in different countries and cultures, and the PDT takes into account individual, developmental and cultural aspects of parenting.

Baumrind's Parenting Typology. One of the most known and widely used parenting theories is Baumrind's Parenting Typology. According to Baumrind, children can be raised and

socialized by varying degrees of parental authority and control that affect children's development on various fronts. She argues that there are four parenting styles; authoritarian, permissive, authoritative, and neglectful, and that they differ from each other on the levels of parental demandingness and responsiveness. (Baumrind, 1965, 1966, 1967, 1968, 1971, 1991). Baumrind (1966) observed the interactions of mothers and their children and at first pointed out only three parenting styles; authoritarian, authoritative, and permissive. Later on, she created the typologies and differentiated them based on parental warmth and parental authority/control, with authoritarian parenting being high on control and low on warmth; authoritative parenting being high on both control and warmth; and permissive parenting being low on control and high on warmth (Baumrind, 1971). Authoritarian parents set rules and boundaries and tend to enforce them harshly without negotiation or effective communication with their children. Authoritative parents also set rules and limits and have expectations of child conformity but they accompany their control with openness, warmth, emotional support, communication, reasoning and discussions, allowing for autonomy and space for the child to have individual interests. Permissive parents do not care about rules; they usually exhibit laxness and softness, ineffective communication, and low demands. Authoritative parenting has the most beneficial effects on children's conformity to parental requests as well as child development including academic success, independence, maturity, and ability to have healthy interactions with peers (Baumrind, 1971, 1991). Baumrind focused on parenting style independent from the child's temperament or response to parenting (Baumrind, 1971; Darling & Steinberg, 1993). It is worth noting that parent and child perception of the parenting style used have been found not to match; children saw their parents as less permissive, less authoritative, and more authoritarian than their parents

viewed themselves to be (Cohen & Rice, 1997). This is an indicator that sometimes findings may be biased if they rely on the point of view of parents only or children only.

There is a vast amount of research assessing the effects of these parenting styles on an array of aspects of children and adolescents' personalities, behaviors and development in various populations. For example, authoritarian and permissive parenting were associated with high scores of narcissism in undergraduate students, while authoritative parenting had the opposite effect (Ramsey, Watson, Biderman, & Reeves, 1996); authoritarian parenting was related to low self-esteem in college students while authoritative parenting had a positive effect on self-esteem (Bun, Louiselle, Misukanis, & Mueller, 1988); and higher academic achievement of eighth and ninth grade students was linked to lower permissiveness or authoritarianism and higher authoritativeness; and their use of alcohol or tobacco was associated with higher levels of permissiveness and low levels of authoritativeness (Cohen & Rice, 1997).

Some of these studies have shown that the effectiveness of authoritative parenting and the effect of the different styles differ according to culture and social setting (Darling, & Steinberg, 1993). For example, a parenting style that exhibits more control has better effects on African American boys than others from European American populations (Deater Deckard & Dodge, 1997). Another study supports this by describing how authoritarian parenting which has adverse effects on European American children contributed to assertiveness for African American girls (Baumrind, 1972). Also authoritative parenting which is known to correlate with academic achievement for European American children and youth does not create the same effect with youth from African and Asian descents (Dornbusch, Ritter, Leiderman, Roberts, & Fraleigh, 1987; Leung, Lau, & Lam, 1998; Steinberg, Lamborn, Dornbusch, & Darling, 1992; Steinberg,

Mounts, Lamborn, & Dornbusch, 1991) and Latinos (Lindahl & Malik, 1999). Hence, parenting practices and styles have different effects on different cultural groups.

Parent Development Theory. Parent Development Theory (PDT) (Mowder, 2005) is a more recent theory that started in the early 1990's as a way to study the parent role. It was initially called the Parent Role Development Theory because Mowder (2005) sees the parent role as central because perceptions of this role determine how people will raise their children. The PDT is more comprehensive than previous theories because it not only argues that parenting develops as the child develops, it also explains the parent role, how it is created, and what are its characteristics; defines how parents develop, how the parent role progresses during one's life, and how the parent role affects parenting behaviors. It tackles parenting by studying how parents perceive the parenting role, and how their parenting behaviors change and evolve through time in response to their various experiences (Mowder, 2005).

PDT defines parents as individuals who recognize, accept, and perform the parent role. On the other hand, the child is defined as the recipient of parenting behaviors, regardless of his or her age; for example, if a 60 year parent has a 35 year old daughter, she is considered a child according to the theory. The PDT is based on social learning and cognitive developmental theories, and hypothesizes that parenting is a social role. People build their perceptions about parenting from the time they are children and these perceptions are continuously refined and modified as they grow and go through various experiences in life. It argues that the parent role is a social role that starts developing in a child's mind as s/he starts conceiving cognitive schemas in attempt to perceive social roles in general such as being a friend, a brother, a sister, a policeman, etc. This schema develops as the child grows and continues to mature depending on experience in his/her own parent-child relationship, family interactions, and even social and

cultural settings. Thus the parent role perceptions are mainly affected by five factors; the individual (the parent), the child, the parent-child relationship, the individual's family dynamics, and the social-cultural milieu (Krocheck & Mowder, 2012; Mowder, 2005; Mowder, 2006; Sperling & Mowder, 2006). The parent schema includes perceptions of what a parent is responsible for, what a parent does in various situations, how a parent is supposed to discipline, how a parent reacts, or when a parent shows love or kindness or harshness, etc.

These perceptions or schemas are what guide individuals' behaviors when they become parents themselves, which means that "individual cognitive conceptions inform parenting views and behaviors" (Mowder, 2006, p.81). For example, when an individual experiences his/her parent display affection or impose rules and limits in a certain way, and observes other parents in his/her family as well as society, his/her perceptions of parental love and discipline will develop accordingly and they will automatically surface and emerge into behaviors when as he/she becomes a parent.

The parent role is very diverse and broad but the main PDT parent role characteristics were defined through years of research with parents and professionals working with parents. The six characteristics that emerged were "bonding, discipline, education, general welfare and protection, responsivity, and sensitivity". The characteristics can be further explained as: 1) bonding: the expressions of positive feelings and actions of love and affection from parents to children; 2) discipline: the establishment of rules and limits by parents to children and the measures taken by parents to ensure the limits set are respected; 3) education: the passing of information from parents to children in the forms of teaching, guiding, advising, and leading by example; 4) general welfare and protection: the provision for children's basic needs, ensuring their health and safety, and protecting them from any kind of harm; 5) responsivity: the ability to

realize your child's calls and needs and responding to those needs but going beyond the general welfare basic needs; and 6) sensitivity: the ability to sense and understand correctly what the child needs and responding to the needs appropriately (Mowder, 2005; Sperling & Mowder, 2006).

Mowder (2006) points out that PDT has its limitations. It provides an overly positive notion for parenting because in real life, there are factors like stress, fatigue, financial burdens, (and other circumstances) that cause parents to behave differently than the parenting perceptions they have. Also the five factors that influence parent role perceptions (explained above) overlap and change by time making it hard to determine which of the factors affects the perceptions and when. The same applies to the parenting role characteristics. They highly overlap and are mostly positive characteristics. However, a seventh parenting characteristic, negativity, was added later on. Negativity includes negative parenting behaviors such as being demeaning, yelling, being harsh, being punitive (for example using corporal punishment), and exercising verbal, psychological, and emotional violence (Krochek & Mowder, 2012; Mowder & Shamah, 2010).

PDT provides a helpful framework to make sense of a person's perceptions and behaviors regarding parenting. It paves the way for professionals to work with parents, understand their unique needs and perceptions, and create interventions specific to their needs and their children's needs (Sperling & Mowder, 2006). It also presents a platform for designing parent education programs by addressing and promoting the parent role characteristics and creating awareness amongst parents about them. This knowledge gained can be used to guide parent and/or professional/caregiver behavior and has been found effective in violence prevention programs (Guttman, Mowder, & Yasik, 2006).

PDT argues that the parenting role and parenting behaviors are not rigid but are supposed to develop and change according to the child's age and developmental needs (Mowder, 2005). This makes sense since for example the needs, motor capabilities, awareness, cognition, and overall development of infants is definitely different than that of preschoolers or adolescents, hence, the parenting behavior needs to be different. This is supported by research; for example, Krochek and Mowder (2012) used the Parent Behavior Importance Questionnaire-Revised (PBIQ-R), which is an assessment tool for what parents (or nonparents) deem as important parenting behaviors corresponding to the parenting characteristics specified by the PDT. They asked professional practitioners, professionals in training, and psychology graduate students about their opinions on the importance of 73 parenting behaviors at each of six age groups; infant/toddler, preschooler, elementary schooler, adolescent, late adolescent, and adult. The study focused on the difference between parenting in the infant/toddler stage and older ages. The results indicated that behaviors related to bonding, general welfare and protection, and responsivity were those regarded by professionals as the three most important in the early stages. Sensitivity, education, and discipline were also found to be important but scored lower than the first three. On the other hand, negativity was found to be unimportant and even inappropriate for young children.

Because the PDT posits that each individual creates his or her own perception of what being a parent entails (Mowder, 2005) and takes into consideration child developmental stages and is consistent with research done in this area, it is well suited for conducting research in the field of parenting and for designing, implementing and evaluating parenting interventions (Mowder, 2006). Moreover, PDT is concerned with individual, familial and social-cultural impacts on parenting schemas and how parenting schemas in turn affect parenting behaviors,

which makes it an appropriate theory for understanding parenting in Egypt. There are special cultural variations and circumstances in Egypt that could affect the development of the parenting cognitions, and these could make it essential to use a theory with cultural sensitivity when adapting a Western parenting program to cater for the needs of Egyptian parents.

How can a Parent Learn Good Parenting?

Since parenting is a huge responsibility and affects both the child and the parent(s), parents may sometimes need outside help. Educating parents about parenting techniques helps families become stronger and healthier because it equips parents with knowledge and supports them to grow and develop as parents, thus creating a healthy environment for their children's growth and development (Samuelson, 2010). Knowledge about child development is a very important factor in learning about good parenting since it helps parents set realistic expectations with regards to the abilities and skills that their children should possess at each stage of their lives (Orme & Hamilton, 1987; Stevens, 1984). Parenting education helps parents understand their children's developmental stages and hence their motivations, capabilities, reactions, behaviors in each stage. Some parents expect too much of their children and others expect too little. Overall, many parents misinterpret their children's various exhibitions of emotions or their behaviors and respond with inappropriate reactions such as frustration or aggression or punishment and excessive discipline because they are unaware of their children's real intentions and have unrealistic expectations (Jarrett, 1982; Johnson, Loxterkamp & Albanese, 1982; Mowder, 2006; Twentyman & Plotkin, 1982). Moreover, the lack of knowledge about child development might contribute to parents missing signs of problems in their children or not noticing deviations from normal development (Stevens, 1984). Stevens (1984) has also linked parents' knowledge about child development to the parents' ability to enhance child development

by creating positive learning environments for their children. This makes sense because parents who do not understand or know the developmental progression and needs of their children will not be able to establish the appropriate circumstances that foster healthy development.

Are parenting programs effective?

There is evidence that parents are capable of changing and/or improving their parenting behaviors when they receive proper guidance, and that their knowledge and skills can be enhanced through interventions (Smith, 2010; Stevens, 1984). Parent education is crucial for parents to enhance their parenting skills and be able to properly attend to their children's needs. It positively affects children's lives and family interactions (Mowder, Shamah, & Zeng, 2010). Informed parenting also allows new parents to be able to meet their new baby's needs, which increases the parent's confidence and empowers them, making parenting a more rewarding experience for both child and parent (Smith, 2010).

Parenting programs have demonstrated their effectiveness in improving positive parenting behaviors and reducing child maltreatment (Prinz et al., 2009; Webster-Stratton, & Reid, 2010), enhancing the parenting skills of participants, their mental health, and the socioemotional development of their children (Patterson et al., 2002a) as well as short term and long term behavioral improvements in children (Patterson et al., 2002b). There are many different evidence-based parenting interventions focusing on diverse aspects of parenting, such as the relationship between parent(s) and child(ren), parental knowledge about parenting and/or child development, and parenting skills and behaviors (Knerr, Gardner, & Cluver, 2013). One of the Western parenting programs that has been evaluated and demonstrated good results is the Incredible Years program, which is a program that targets parents and works on improving their personal adaptation and their parenting skills to ultimately promote their wellbeing and the

healthy development of their children in attempt to reduce delinquency and other problems such as violence and use of drugs (Webster-Stratton, & Reid, 2000; 2003; 2010). Another program is The Positive Parenting Program or the Triple P, which focuses on parenting skills, knowledge and self-regulation and care. This program also has five levels and modules starting from community-wide sessions to focused one on one sessions with parents (Prinz et al., 2009; Sanders, 1999; 2008). Lindsay, Strand, & Davis (2011), evaluated the effectiveness of three parenting programs, namely Incredible Years, Triple P and Strengthening Families Strengthening Communities, by assessing the parenting style and skills, the parenting satisfaction, the parent mental wellbeing, and children's behaviors of 1121 parents pre and post joining the programs. The study demonstrated the effectiveness of all three programs in improving parenting skills and wellbeing, reducing children's problem behaviors, and enhancing positive behaviors.

Are Parenting Programs Applicable Across Diverse Cultures?

In general, there are a lot of cultural variations across countries and even within countries. The cultural gap widens the most between Western high-income countries and Eastern developing countries. For example, Western European cultures are individualist cultures that value autonomy and independence; while Eastern or Oriental cultures such as Egypt, Iran, India, or Pakistan have a collectivist culture that encourages interdependence rather than independence and individualism and values the group's needs and wants over the needs of the individual (Rudy & Grusec, 2006). These and many other cultural characteristics affect the development of parenting cognitions and hence parenting behaviors. Parenting in collectivist cultures tends to be more controlling, focuses more on obedience, puts more restraints on play and feeding time (Rudy & Grusec, 2006), and has less tolerance to communication and child self-expression; all of which are qualities of authoritarian parenting. El Safty (1979) argues that parenting in Egypt is

more controlling than Western parenting. Also, it was found that most Egyptian parents use authoritarian parenting style with their adolescent sons and daughters; but the effect of the authoritarian parenting was not harmful as it is with white adolescents in liberal cultures, due to the overall authoritarian culture in Egypt (Dwairy & Menshar, 2006). Similarly, Rudy & Grusec (2006) state that mothers from collectivist cultures like Egypt adopted a more authoritarian style than their counterparts from individualist Western cultures but their children aged 7 to 12 did not have lower self-esteem, because unlike the individualist authoritarian parenting style, the collectivist authoritarian style was not associated with maternal negative affect. This is partly because authoritarian parenting endorses collectivist beliefs of respect and obedience and is widely spread in collectivist cultures, so it is considered the norm and hence is automatically endorsed and used by parents without being associated with negative feelings towards children, and it is accepted by children.

As explained by the PDT, parenting is not a standalone activity; parenting cognitions and perceptions of the parent role and hence parenting behaviors are influenced by factors beyond the parent and child. Factors like culture, class, and family composition have an effect on parents' parenting style (Darling & Steinberg, 1993). Spencer (2003) states that usually when there is poverty or material deprivation, a low level of parent education, or high family violence, these are accompanied with a high degree of parenting problems as well as parent, child and adolescent mental health problems. This is apparently the case in low and medium income or developing countries. These countries may vary in terms of income but mostly have in common that they have high levels of poverty and violence, fragile healthcare and social protection systems, and inequality of income (Knerr, Gardner, & Cluver, 2013); factors that ultimately lead to family stressors and increases the necessity for parenting interventions. Gillies (2006) also

sheds the light on differences in childrearing values and practices between middle class and working class parents. She explains that middle class parents put immense importance and invest a lot in their children's education, while working class parents are usually disengaged from their children's schools, teachers and homework and focused more on providing them with survival skills. Gilles also argues that working class parents may defend and protect their children, sometimes unreasonably, due to feeling of inferiority; and that to communicate their love to their children they provide them with treats and comforts that may be seen as inappropriate by professionals and middle class parents. Such differences are indicative of the effects of social class on parenting and need to be considered when developing parenting interventions.

Almost all parenting programs originated and are concentrated in Western and high income countries. Knerr, Gardner & Cluver (2013) explain that parenting interventions have evidence of success in high-income countries and that there are also facts and data supporting their relevance across cultures and in different countries. By reviewing several interventions done in low and middle income countries, they show that such interventions are applicable and effective in these countries. Some of the evaluated and established parenting interventions have been successfully adapted and implemented in non-Western countries the Triple P program (Leung, Sanders, Leung, Mak, & Lau, 2003; Matsumoto, Sofronoff, & Sanders, 2010). Different types of adaptations can be made to an evidence-based intervention so that it is more culturally appropriate. Several studies such as Cluver et al., 2011; Baker-Henningham's et al., 2011 & 2012; Rahman et al., 2009; provide examples of adaptations such as accounting for family structure such as extended families versus dynamic families, literacy levels, poverty, language barriers by piloting the projects first, simplifying or translating intervention materials, or using

culturally accepted methods (such as plays instead of videos) without altering the program theory (as cited in Knerr, Garden & Cluver, 2013, p.10).

Therefore, despite the cultural and social variations, with the appropriate adaptations, parenting programs are applicable and effective in changing parenting knowledge and practices in developing countries including Egypt.

Are Parenting Programs Available in Egypt?

Real parent education does not exist in Egypt. In the past few years, there has been an increase in sporadic workshops or educational sessions given by various NGOs and private training centers that guide parents on specific topics. For example, The Learning Resource Center (LRC) addresses children's learning and development difficulties by providing assessment and therapy solutions (<http://www.lrcegypt.org/>). It has recently been announcing one day workshops for parents such the Homework Success workshop, Parents You Make a Difference workshop, and Children's Sexual Behavior workshop (LRC Egypt, personal communications, January 20, January 26, and May 3, 2015). Positive Parenting Egypt is another organization that aims at improving how children are raised and educated in Egypt and has occasional one day workshops for parents such as positive discipline for teenagers or how to deal with your toddler (<https://www.facebook.com/PP.Egypt>). SAFE is a non-profit organization that focuses on the prevention of child sexual abuse by empowering children and educating parents, teachers and caregivers about the topic (<http://www.safekidseg.com/>). Mother and Child magazine and website is another resource for parents in Egypt on various topics including parenting (<http://mother-and-child.net/>). However, there is not a single comprehensive or ongoing formal parenting program to guide Egyptian parents.

In order to develop a parenting program in Egypt, we cannot adopt a Western parenting program and just translate it to Arabic. Taking into account cultural beliefs is an essential aspect in understanding and changing parental behavior through parent training programs (Forehand & Kotchick, 1996). Cultural, economic, and social aspects play a big role in parenting (Taylor, Spencer, & Baldwin, 2000); they help in understanding parenting and hence creating appropriate parenting programs. The appropriate program has to be culturally sensitive; that is it has to take into account the culture, traditions, values, and lifestyles (Kumpfer, Alvarado, Smith, & Bellamy 2002) of Egyptian parents in order to ensure effectiveness. Cultural sensitivity and proper adaptation also makes it easier to recruit and retain program participants and improves the overall program effectiveness (Domenech Rodriguez, Baumann, & Schwartz, 2011). Smith (2010) argues that programs should also be able to address parents' beliefs and values so that they accept the information and guidance given to them and do not ignore or quit the program. Parenting values and behaviors are shaped by culture and the success of parenting styles differs according to context (Smith, 2010). This was stressed in the PDT model and was also apparent in the effects of authoritarian, authoritative and permissive parenting on families from different cultures. Cultures do not only vary across countries; even within the same country, a family living in a low income and insecure neighborhood will adopt different control and limit setting strategies with their children than a family living in a gated community where children can safely play outdoors.

Hence, to be able to create an Egyptian parenting program or make suggestions for one, we should first gain some insights about the current parenting culture in Egypt by understanding the knowledge, skills, practices, and behaviors of Egyptian parents.

Purpose of the Study

As established earlier, good parenting is of utmost importance for the wellbeing of both the parent and the child. Being a good parent is not an easy task and in most cases it requires support and guidance. One formal way of providing support is through parenting programs and workshops that teach parents about their children's developmental needs and about the best ways to be good parents for them in each of these stages. Egyptian parents of all social, economic and educational levels have no access to this kind of formal support simply because it does not exist in any Egyptian community. This can lead to parents having a mistaken understanding or lack of knowledge about their children and therefore mistaken or wrong practices towards them. This thesis will take a step towards understanding Egyptian parents by assessing what they know about their children's development, how they discipline their children, how they behave as parents, how they perceive their parenting role, and what their main needs are in a parenting program. The results of this assessment will then be used to make recommendations for an Egyptian parenting program that addresses the unique needs, strengths and challenges of Egyptian parents.

Methodology

Participants

A convenience sample of 255 participants responded to an online survey. There was a completion rate of 47%, with 120 individuals actually completing the entire survey. Ninety-seven percent of the respondents were allowed to proceed with the survey because they were parents of children aged zero to 12 and 3% were not allowed to proceed. Eighty-five percent ($n = 149$) were mothers and 15% ($n = 27$) were fathers. In terms of age, 48% of the participants

were in the 31-35 age bracket ($n = 85$), and 24% were in the 26-30 bracket ($n = 43$) followed by 18 % in the 36-40 age bracket ($n = 31$), 8% in the 41-50 age bracket ($n = 14$) and 2% in the 18-25 age bracket ($n = 3$) (8% and 2% respectively). The majority of the respondents (60%) lived in Heliopolis and Nasr City ($n = 55$) and New Cairo's First to Fifth settlements (Tagamoa' district) ($n = 49$), with the remaining 40% distributed all over Greater Cairo, and a very few Egyptians currently living abroad. Ninety percent of the participants had one ($n = 79$) or two ($n = 80$) children and the remaining 10% had three ($n = 17$). The participants' children's ages ranged from 2 months up to 17 years, with all participants having at least one child younger than 12 years.

Research Tools

To assess parenting knowledge, perceptions, skills and needs for support in Egypt, an online survey was developed. The survey measured parents' current level of knowledge of their children's developmental stages and needs, how they perceived and performed their parenting role, what disciplining techniques they preferred, and how they saw themselves as parents. Specifically it assessed 1) parents' knowledge of their children's development in the first few years; 2) their current disciplining practices and parenting styles (with reference to Baumrind's Parenting Typology); 3) their perceptions of the parent role and the parent role characteristics as defined by the PDT; and 4) their perceptions of their parenting strengths, weaknesses and needs. Items from various existing parenting measures as well as questions developed by the researcher were used to measure the four aspects of parenting. The final self-report questionnaire was made up of 64- items (see Appendix A), divided as follows:

- 1) Eleven- items describing the participants' demographic characteristics and their perceived parenting strengths, weaknesses and needs.

- 2) Twenty items measuring parents' knowledge of child development about the cognitive and socio-emotional development of their children. This section was adapted by the researcher from the Caregiver Knowledge of Child Development Inventory (Ertem et al., 2007), which is a survey that was created to measure mothers' knowledge of their children's development in Turkey; and the Family and Community Survey on Early Childhood (First Things First [FTF], 2009), which is a baseline survey that was done in Arizona to measure parents' knowledge of their children's early development and other family related aspects. All questions in this section had three multiple choice items or used 3 point Likert scale.
- 3) Items measuring disciplining styles and parenting behaviors were derived from several scales as indicated below:
 - a) Eleven items measuring laxness from the Parenting Scale (PS) (Arnold, O'Leary, Wolff, & Acker, 1993). The PS is a measure used to assess dysfunctional disciplining techniques categorized under laxness, overreactivity, and verbosity. In the validation of the scale the laxness factor showed an internal consistency coefficient alpha of .83, and test-retest correlations of .83. These items correspond to the permissive parenting style (Baumrind, 1968).
 - b) Ten items measuring overreactivity from the Parenting Scale (Arnold, O'Leary, Wolff, & Acker, 1993). The validation of the scale overreactivity factor showed an internal consistency coefficient alpha of .82, test-retest correlations of .82. These items correspond to the authoritarian parenting style (Baumrind, 1968).
 - c) Ten items measuring supportive/engaged parenting from the Parent Behavior Inventory (PBI) (Lovejoy, Weis, O'Hare, & Rubin, 1999). The PBI is a brief scale that measures parenting behaviors on two dimensions; support/engagement and hostility/coercion. The

support/engagement dimension corresponds to the factor of warmth and involvement that is part of authoritative parenting as well as the constructs of bonding, education, responsivity, and sensitivity of the PDT's parent role characteristics. When validated, supportive/engaged scale of the PBI had high factor validity with Cronbach's alpha of .83; showed high content validity with a mean relevance and responsiveness of 4.51 for its items on a 5 point scale; a test-retest coefficient of .74; and interrater reliability coefficient of .90.

- 4) Two- items measuring how Egyptian parents perceive their parent role as defined by the PDT. They were asked to rank the seven parent role characteristics according to the importance of each characteristic and then asked if these ranks would remain constant or change as their children grew.

Procedures

The survey was in English so the target participants were upper and middle class English-speaking Egyptian mothers and fathers of children aged 0 to 12. The final 64-item questionnaire was administered online through QuestionPro. It was sent to employees of entities such as private universities, schools, nurseries, multinational companies and banks, and was posted on the social media platform Facebook.

Since this was an exploratory study, the analysis of the quantitative data was primarily descriptive. Confirmatory factor analysis and reliability testing were done to see if the parenting scales were valid for an Egyptian sample. Thematic analysis was used for the qualitative data of the parents' perceptions about their parenting strengths and challenges which were grouped according to the PDT's seven parent role characteristics.

Results

This study assessed what parents knew about their children's development, how they disciplined their children, how they behaved as parents, how they perceived their parenting role, and what their main needs were in a parenting program.

Knowledge of Child Development

Thirty-four percent ($n = 129$) of the parents who participated in the study stated that their main source of knowledge or support in parenting their children was online materials, followed by informal support from family and friends (26%, $n = 96$), books (21%, $n = 79$), formal parenting classes (6%, $n = 23$), and TV programs (6%, $n = 22$). The remaining seven percent ($n = 27$) of participants chose other and specified sources of knowledge such as their child's pediatrician, mobile applications, personal studies (such as being a pediatrician, a Montessori teacher or having a BA in child psychology, child counseling), groups for mothers (on Facebook or support groups), Christian religious sources (e.g. sermons, religious speeches, church activities), personal experiences, and personal instinct or intuition.

The study participants were asked 20 questions to assess their knowledge about their children's development in various areas:

- Cognitive or brain development: A little over half (52%, $n = 81$) of the parents were aware that their child's brain develops in the uterus; 31% ($n = 48$) believed that it develops in the first three months of the child's life and the 17% ($n = 27$) thought it develops around the time the child turns one. Also only about half the parents knew that experiences occurring in the child's first year impact his/her school performance (51%, $n = 80$); but the majority were aware that a child's capacity to learn is not determined at birth but rather can be affected by factors later on in the child's life (86%, $n = 134$).The

majority of parents also thought that play has a very big impact on a child's intellectual development (75%, $n = 117$), and knew that children start playing imaginary play between one and two years of age (78%, $n = 121$).

- **Motor development:** The majority of parents knew that a child is supposed to start walking alone with good coordination between ten and 15 months of age (87%, $n = 135$), and start grasping tiny things with their fingers between seven and nine months of age (72%, $n = 112$). They knew that they should start giving their children paper and crayons to draw and color between one and two years of age (80%, $n = 125$), and start letting their children sit with support between three and six months of age (70%, $n = 109$). Fewer parents knew they should start giving their children a spoon or fork to eat by themselves between nine and 12 months of age (55%, $n = 86$).
- **Language or skills development:** The vast majority of parents knew that a child is supposed to start saying single meaningful words between nine and 18 months of age (89%, $n = 139$), that a young child learns more from interactions with real persons than from TV programs (82%, $n = 128$), but fewer knew that play has a very big impact on a child's language development (64%, $n = 100$). Most knew that parents are supposed to start talking to their children when they are still in the mother's uterus (78%, $n = 121$); start teaching their children numbers and colors between one and two years of age (75%, $n = 117$); but fewer knew that they should start looking at children's books with their children from four to six months of age (53%, $n = 83$).
- **Socio-emotional development or age appropriate behavior:** Most parents knew that letting a five year old choose what to wear everyday was not likely to spoil her/him (94%, $n = 147$); and most knew that a three year old would not easily sit quietly for an hour (82%, $n = 121$).

= 128), but fewer knew that a 15-month old would not easily share toys with their siblings or other children (67%, $n = 105$). Only half of the parents thought that rocking a one year old to sleep is not likely to spoil her/him (53%, $n = 83$); and less than half of the parents thought that a six month old is too young to spoil (42%, $n = 66$). The majority of parents also thought that play has a very big impact on a child's social development (83%, $n = 130$).

Parenting and Disciplining Style

The participants were asked 31 questions to determine their disciplining style and their behaviors as parents. First they were asked 11 questions from the Parenting Scale (PS) to measure laxness (which corresponds to Baumrind's permissive parenting style), then 10 questions from the PS to measure the level of overreactivity and hostility (which have commonalities with Baumrind's authoritarian parenting style), and finally 10 questions from the Parent Behavior Inventory measuring supportive/engaged parenting (which corresponds to the factor of warmth and involvement that is part of authoritative parenting as well as the constructs of bonding, education, responsivity, and sensitivity of the PDTs parent role characteristics).

The Parenting Scale. This section of the survey had 21 questions covering, laxness and overreactivity. Each question described a discipline behavior and was rated on a 7-point scale. The two ends of the scale were labeled with opposite statements, one describing an effective means of discipline and the other ineffective, and the participants had to choose where they fit. Some items were reverse coded. For each item, after reverse coding, the lower scores indicated more effective parenting and discipline.

Some of the participants were unable to view the two statements on both ends of the scale on their browsers or mobile phones so unfortunately some chose the same number for all the

questions just to pass this section and continue the survey. Hence, the responses that had the same number for all 21 questions were omitted and not taken into consideration in the below results; only respondents who had at least one different answer were considered.

In order to assess the reliability of the parenting scale when used with Egyptians, Cronbach's alpha was calculated for both the laxness and overreactivity factors. The laxness factor scored an alpha of .61 with the Egyptian parents versus .83 in the original version. Table 1 shows the mean scores for each question. The overreactivity factor exhibited an alpha of .68 with the Egyptian parents versus .82 in the original version. Table 2 shows the mean scores for each question.

When both the laxness and the overreactivity factors exhibited relatively low reliability, a confirmatory factor analysis was performed using a Varimax rotation. The two factors that emerged were not congruent with the original factors identified (Arnold, O'Leary, Wolff, & Acker, 1993). Table 3 shows the factor loading for each item. Factor loadings of .35 or above were considered as per the original study (Arnold, O'Leary, Wolff, & Acker, 1993). Four out of the 21 items did not belong to either factor, and four items that were supposed to measure laxness loaded on the overreactivity factor instead making up factor 1, and two items from overreactivity loaded on the laxness factor making up factor 2.

Table 1

Mean scores of Parenting Scale's laxness factor items

Item	N	Min. (1)	Max. (7)*	Mean	Std. Deviation
3. I threaten to do things that...	128	I am sure I can carry out	I know I won't actually do	2.50	1.882
4. I am the kind of parent that...	127	sets limits on what child is allowed to do	lets my child do whatever he or she wants	2.59	1.615
7. When I want my child to stop doing something...	128	I firmly tell my child to stop	I coax or beg my child to stop	2.20	1.534
9. When we're not at home...	128	I handle my child the way I do at home	I let my child get away with a lot more	2.76	1.782
10. When my child does something I don't like...	128	I do something about it every time it happens	I often let it go	2.84	1.575
13. When my child doesn't do what I ask...*	128	I often let it go or end up doing it myself	I take some other action	3.17	1.879
14. When I give a fair threat or warning...*	128	I often don't carry it out	I always do what I said	3.05	2.075
15. If saying "No" doesn't work...	128	I take some other kind of action	I offer my child something nice so he/she will behave	2.80	1.867
17. When my child misbehaves and then acts sorry...	128	I handle the problem like I usually would	I let it go that time	4.85	2.115
19. When I say my child can't do something...*	128	I let my child do it anyway	I stick to what I said	3.53	2.035
21. If my child gets upset when I say "No" ...*	128	I back down and give in to my child	I stick to what I said	2.61	1.815

*Reverse coded

Table 2

Mean scores of Parenting Scale's overreactivity factor items

Item	N	Min. (1)	Max. (7)**	Mean	Std. Deviation
1. When I'm upset or under stress...*	128	I am picky and on my child's back	I am no more picky than usual	4.57	1.918
2. When my child misbehaves...*	128	I usually get into a long argument with my child	I don't get into an argument	4.72	1.853
5. When my child misbehaves...*	128	I give my child a long lecture	I keep my talks short and to the point	3.23	2.12
6. When my child misbehaves...*	128	I raise my voice or yell	I speak to my child calmly	4.34	1.957
8. After there's been a problem with my child...*	128	I often hold a grudge	things get back to normal quickly	2.79	1.959
11. When there's a problem with my child...*	128	things build up and I do things I don't mean to do	things don't get out of hand	3.77	1.921
12. When my child misbehaves, I spank, slap, grab, or hit my child ...**	128	never or rarely	most of the time	1.85	1.268
16. When my child misbehaves...	128	I handle it without getting upset	I get so frustrated or angry that my child can see I'm upset	3.74	1.888
18. When my child misbehaves...	128	I rarely use bad language or curse	I almost always use bad language	1.99	1.498
20. When my child does something I don't like, I insult my child, say mean things, or call my child names...	128	never or rarely	most of the time	1.83	1.381

*Reverse coded

**Item number 12 had a maximum score of 6 not 7 like all the other items

Table 3

Factor loading for each of the Parenting Scale's laxness and overreactivity items

#	Item		Factor	
	Mistake	Effective Strategy	1	2
1.	I am picky and on my child's back	I am no more picky than usual	-	-.401
2.	I usually get into a long argument with my child	I don't get into an argument	.367	-
3.	I threaten things I know I won't actually do	I am sure I can carry out	-	.658
4.	I let my child do whatever he or she wants	I set limits on what child is allowed to do	-	.650
5.	I give my child a long lecture	I keep my talks short and to the point	.688	-
6.	I raise my voice or yell	I speak to my child calmly	.515	-
7.	I coax or beg my child to stop	I firmly tell my child to stop	-	.537
8.	I often hold a grudge	Things get back to normal quickly	.706	
9.	When we're not at home, I let my child get away with a lot more	I handle my child the way I do at home	-	.525
10.	When my child does something I don't like, I often let it go	I do something about it every time it happens	-	.707
11.	Things build up and I do things I don't mean to do	Things don't get out of hand	.610	-
12.	I spank, grab, slap, or hit my child most of the time	Never or rarely	-	-
13.	When my child won't do what I ask, I often let it go or end up doing it myself	I take some other action	.601	-
14.	When I give a fair threat or warning, I often don't carry it out	I always do what I said	.671	-
15.	If saying "no" doesn't work, I offer my child something nice so he/she will behave	I take some other kind of action	-	.377
16.	I get so frustrated or angry that my child can see I'm upset	I handle it without getting upset	-	-
17.	If my child misbehaves and then acts sorry, I let it go that time	I handle the problem like I usually would	-	-
18.	I almost always use bad language	I rarely use bad language or curse	-	.532
19.	When I say my child can't do something, I let my child do it anyway	I stick to what I said	.487	-
20.	I insult my child, say mean things, or call my child names most of the time	Never or rarely	-	-
21.	If my child gets upset, I back down and give in	I stick to what I said	.614	-

Extraction Method: Principal Component Analysis.

The Parenting Behavior Inventory. The factor that was being measured by the PBI was the supportive/engaged parenting. All 10 questions in this section were on a 5 point Likert scale where the answer “Not at all true, I did not do that at all this week” indicated a low score of 1 and “Very much true, I did that all the time this week” indicated a high score of 5. Table 4 shows the mean scores for each question. The overall mean for the supportive/engaged factor is 4.21 and the factor showed high reliability with a Cronbach’s alpha of .872.

Table 4

Mean scores and standard deviation for the supportive/engaged parenting factor of the Parent Behavior Inventory

Item	N	Min. Score	Max. Score	Mean	Std. Deviation
1. I have pleasant conversations with my child	123	1	5	4.00	.958
2. I try to teach my child new things	123	1	5	3.81	1.035
3. My child and I hug and/or kiss each other	123	1	5	4.67	.661
4. I laugh with my child about things we find funny	123	1	5	4.46	.750
5. My child and I spend time playing games, doing crafts, or doing other activities together	123	1	5	3.54	1.018
6. I listen to my child's feelings and try to understand them	123	1	5	4.20	.911
7. I thank or praise my child	123	1	5	4.47	.772
8. I offer to help, or help my child with things s/he is doing	123	1	5	3.87	.958
9. I comfort my child when s/he seems scared, upset, or unsure	123	1	5	4.46	.823
10. I hold or touch my child in an affectionate way	123	1	5	4.57	.780

Perceptions of Parenting

The participants were asked two questions on how they perceive their parenting role characteristics as defined by the PDT and two questions to describe what they perceive are their three main strengths as parents and their three main areas of weaknesses. The strengths and struggles were analyzed thematically into the seven PDT parent role characteristics. The thematic analysis had 84% interrater reliability.

PDT parent role characteristics. The two questions that were derived from the PDT asked parents to rank the seven parenting role characteristics (bonding, discipline, education, general welfare and protection, responsivity, sensitivity, and negativity) based on their perceptions of their importance. Then they were asked if their ranking would change as their children grow or would remain constant and were asked to explain the reason behind their choice.

The average ranks for each of the characteristics were: bonding 1.64, general welfare and protection 3.17, discipline 3.19, education 4.18, responsivity 4.38, sensitivity 4.51, and negativity 6.93. It was clear that bonding was the most valued characteristic where 67% of parents ($n = 79$) ranked it as number one and 92% ($n = 109$) of parents ranked it in first, second or third place. At the other end, 97% ($n = 114$) chose negativity in seventh place. Egyptian parents were not in agreement when it came to the other five characteristics; 58% ($n = 69$) chose discipline and 57% ($n = 67$) general welfare and protection in the top three ranks, and 64% ($n = 76$) chose education, 69% ($n = 82$) sensitivity, and 71% ($n = 84$) responsivity in fourth, fifth or sixth place. Table 5 shows the percentage of participants who chose the rankings for each characteristic.

Sixty-one percent ($n = 71$) of the participants stated that their rankings would change as their children grow and 39% ($n = 46$) claimed rankings would remain constant. Only 54% ($n = 63$) of participants explained their choice.

Table 5

Participants' ranking of the seven PDT parent role characteristics

Characteristic / Ranking	1	2	3	4	5	6	7
Bonding	66.95%	16.10%	9.32%	4.24%	0.85%	1.69%	0.85%
Discipline	13.56%	34.75%	10.17%	15.25%	13.56%	12.71%	0.00%
Education	0.85%	7.63%	26.27%	23.73%	22.03%	18.64%	0.85%
General Welfare &							
Protection	16.10%	21.19%	19.49%	24.58%	10.17%	8.47%	0.00%
Responsivity	0.00%	11.86%	16.10%	17.80%	31.36%	22.03%	0.85%
Sensitivity	2.54%	8.47%	18.64%	12.71%	22.03%	34.75%	0.85%
Negativity	0.00%	0.00%	0.00%	1.69%	0.00%	1.69%	96.61%

Those who said the ranking of the characteristics they chose would change as their children grow explained their choice based on one of the following grounds:

- a) That the ranking depends on the child's developmental stage because their skills, needs, and personalities evolve. Some parents were specific and mentioned the characteristics that they believe would change. For example, some said that bonding would increase as their children grow; some said discipline and education would increase; some said that general welfare and protection will decrease because children will better take care of themselves as they grow. One participant explained, "my daughter is young now so she

needs to feel loved and safe therefore general welfare, protection and bonding are priorities. But as she enters puberty there might be more focus on other areas such as education and discipline”.

- b) That as their children grow or as time goes by, their skills, perceptions, understanding and behaviors as parents change based on trial and error or on learning and experience. One parent said, “kids grow up so do we.. And people's ways of seeing things and thinking change according to their age and experiences in life.. The more we live the more we have experiences and change the way we deal with things”; another explained that the ranking would change, “because [I] am working on myself more and more and trying to learn more about kids and parenting, because [I] am not satisfied with the way [I] am treating my kids, because [I] am too much affected with the way [I] am raised with and I want to totally change it”.

Some participants merged both explanations; for example one elaborated, “I find that I reprioritize according to many factors such as how old my child is and what he needs, but also where am I as a person, what's imp[ortant] to me now and finally, what does our relationship and family need at the time being”.

Those who explained why their ranking would not change mainly said that the ranking depends on their values, principles, goals or priorities as parents or on their nature or personalities as persons so it will remain constant. A few claimed that their children will always be children or babies in their eyes hence their ranking would not change regardless of their children’s age. One participant elaborated that the rankings would not change because:

[They] are general guidelines that start with love, affection and understanding and being responsive, taking care of their safety, educating them by actions and discussions, then

setting the principles, ... and [to make sure they work] I would rather chose positive reinforcement but reality is mostly negativity is used - and I believe this ranking works with a little child as well as a teenager.

Another said, "I guess it will remain constant as it's based on my nature and attitude and my way of thinking ...", and one mother explained, "I am an over protective mother, so my children's safety sometimes limits a lot of things we would like to do. I think as they got older I will still be protective, and over caring, this will never change". Others in general defended their choice by saying that they believe their ranking would not change because it will end up raising happy or healthy children.

A few participants explained that their first priority will always be to love their children, so bonding will always be ranked first, but the other characteristics might change as their children grow.

Perceptions of strengths as parents. When asked about the three things they do best as parents, most participants wrote areas of strength related to the PDT's bonding, general welfare and protection, and education parent role characteristics. Fewer parents mentioned discipline and there were even fewer responses that hit on responsivity and sensitivity. None of the parents mentioned anything related to negativity in this section. Seven parents did not answer this question and just wrote "NA", or "none", or "no idea", or "can't think of something", or wrote something irrelevant or typed a letter to be able to move to the following question. One participant wrote that this was a very hard question and took him/her a lot of time to think about the strengths.

Bonding. Many parents perceived that they were good at loving and caring for their children or doing things that showed their love and strengthened their bond with their children.

They mentioned things like:

- Emotional manifestations of bonding: loving and/or being emotional/affectionate ($n = 38$); caring ($n = 16$); nurturing ($n = 3$); or empathy;
- Behavioral manifestations of bonding: being close, involved, available or there for the child ($n = 11$); hugging or cuddling ($n = 6$); being dedicated or devoted ($n = 4$); being cheerful or enthusiastic ($n = 4$); being patient ($n = 2$); co-sleeping; pampering;
- Actions that strengthen bonding: listening ($n = 19$); talking ($n = 17$); communicating ($n = 10$); befriending ($n = 4$); singing or dancing ($n = 3$); sharing secrets; spending quality time ($n = 18$); encouraging or motivating ($n = 7$); soothing or comforting ($n = 5$); having fun and making child happy ($n = 6$); breastfeeding ($n = 4$); putting the child first ($n = 2$); respecting the child ($n = 2$); trying not to stress out for the child's sake; getting gifts.

All these things are forms of expressing positive feelings and actions of love and affection from parents to children. Two mothers mentioned and were really proud that they do everything for their children themselves as opposed to having a nanny take care of their children (something that is very common among mothers in this socioeconomic segment). One mother wrote that she tries to cover for the father's absence; and one participant thought his/her strength is fulfilling the children's sense of belonging to their family.

General welfare and protection. It is clear that some of the things described in the bonding section also fall under general welfare and protection such as breastfeeding; dedication to the child; having fun, talking or interacting with the child; and taking care of the child in

person as opposed to hiring a nanny. Such aspects entail a lot of love and at the same time take care of the child's various needs.

Other things that the parents mentioned fell more clearly under the general welfare and protection which entails the provision for children's basic needs, ensuring their health and safety, and protecting them from any kind of harm. This included:

- Child's physical needs: many participants ($n = 42$) mentioned feeding or making food, of these some ($n = 24$) specified focusing on healthy or nutritious food and one mentioned making tasty food; taking care of child in general or of general physical needs ($n = 22$); taking care of baby's health ($n = 10$); changing diapers, bathing or keeping baby clean ($n = 12$); sleeping or having a sleep routine ($n = 6$); clothing baby or keeping baby warm ($n = 3$).
- Child's socio-emotional needs: playing with child ($n = 50$); entertaining child, going out or engaging in fun or social activities ($n = 20$); making sure children play sports and go to training ($n = 12$); creating a schedule or sticking to a routine ($n = 10$); shopping ($n = 2$), and appropriate things for children.
- Safety, protection, and stability: monitoring, observing, protecting, or providing safety ($n = 8$); planning for future and creating financial stability ($n = 3$); providing a stable or calm environment ($n = 2$); trying to balance between work and children ($n = 2$); being the child's shelter.

Two parents mentioned reading or increasing knowledge about parenting and children to better take care of their children; and one father mentioned supporting his wife..

Education. Similar to the overlapping aspects between bonding and general welfare and protection, there is one main overlap between general welfare and protection and education,

which is playing. Playing is a basic need for children, yet it is also the most powerful education tool during childhood. Some might argue that it is also a form of bonding in the sense that it is spending quality time and entails love and affection. So even though it is mentioned in general welfare and protection, it is also crosscutting with the some other characteristics.

Others things that parents mentioned and fit with education and entail the passing of information from parents to children and all forms of teaching, guiding, advising, or leading by example including:

- Schooling, education and intellectual development: supporting child with studying and doing homework ($n = 8$); engaging in activities that enhance child's knowledge, intelligence, or brain development ($n = 7$); reading to or with child ($n = 7$); providing a good education ($n = 4$); trying to make the child be the first in their class (at school); storytelling and encouraging child to think critically.
- Guiding: discussing issues, explaining, or answering child's questions ($n = 11$); giving advice, directing, coaching, or leading ($n = 7$); supporting or helping ($n = 6$); leading by example or being a role model ($n = 4$).
- Supporting with skills and character building: fostering child's hobbies, interests, skills or talents ($n = 9$); supporting child's cultural development, experiencing new things, or traveling ($n = 6$); encouraging child in character building activities ($n = 3$); widening child's perspective.
- Teaching: a few parents ($n = 4$) saw their strength in teaching their children without specifying what they taught them; other parents mentioned teaching their children a variety of things such as to be independent ($n = 3$), to talk ($n = 2$), to do things on their own, self-confidence, value of the family, tolerance, etiquette, and common sense.

Discipline. Some parents ($n = 12$) generally said that what they think they are good at is discipline without specifying how. Other parents talked about discipline related things that fall under how to establish rules and limits by parents to children and the measures taken by parents to ensure the limits set are respected such as:

- Methods of instilling discipline: teaching about ethics, morals, good manners ($n = 6$); directing and enforcing discipline in a loving way, through reasoning, or through stories ($n = 3$); setting rules and using rewarding and timeouts; being a supportive friend yet a tough mother when punishment is needed; respecting child opinion, encouraging, motivating, discussing, communicating, being fair, being consistent, giving responsibilities,
- Discipline related strategies: being patient or trying to increase tolerance and decrease yelling ($n = 2$), involving child in decision making and setting goals together ($n = 2$), ensure there is a friendship relationship and that the children are not scared of parent, using negotiation and intellect, discussing the main principle in each situation, referring to a specialist for guidance with behavioral problems.

Responsivity and sensitivity. A few parents mentioned things regarding their ability to realize child's calls and needs and responding to those needs beyond the general welfare basic needs and the ability to sense and understand correctly what the child needs and responding to the needs appropriately. These included:

- Responsivity: listening ($n = 15$), trying to sooth or calm baby ($n = 3$), responding to needs ($n = 2$), acknowledging child's feelings.
- Sensitivity: trying to understand child or child's needs or behaviors or skills ($n = 8$), trying to go deep in child's feelings and thinking, let children take their time, setting

routines yet following children's lead at the same time, accepting child's sadness, staying calm when baby is nervous..

Miscellaneous. Some parents mentioned things that did not fit clearly under any of the seven characteristics.

- Spirituality and religion: a few parents ($n = 5$) mentioned teaching their children to pray, teaching them about religion, or teaching them to about God as one of their strengths as parents.
- Technology and interaction: some parents ($n = 4$) specified that their strength is that they limit their children's use of electronics, TV or gadgets (no mobiles, tablets, video games,..etc). Along the same lines, some parents ($n = 4$) mentioned they try to make time for activities that involve the whole family, or activities that entail two way communication as opposed to using gadgets.
- Self-determination: a few parents ($n = 3$) said things like allowing the children to become their own person, or letting them live from their own perspective, or giving opportunities for the children to speak their mind. Two participants were very unique in their answers. Among other things, the first one said that s/he is trying to help them (the children) not to be consumers only, and that s/he does no comparisons with friends and family. The other specified a few things among which that they involve their children in scouts, catechism, and community service activities. And finally, one parent said that her strength is that s/he is trying to raise a perfect child.

Perceptions of challenges as parents. When asked about the three things they perceive as their challenges as parents or the three things they need support with, it was much harder to fit their replies in the PDT parent role characteristics setup. The areas that did fit were mainly under

education, discipline, general welfare and protection, and negativity. Other areas were also mentioned by parents. Three parents said that they do not face any challenges as parents; one just said “nothing”, the second typed “NA”, and the other said that s/he did not face challenges “yet” and thinks that maybe there will be more challenges as the babies grow older; and two other participants just typed in one or more letters to be able to move to the following question. Six items were not included because they were unclear.

General welfare and protection. Some of the things mentioned by parents (mostly mothers) as challenges included taking care of a number of the children’s needs such as:

- Physical needs: sleeping issues ($n = 24$) including general sleeping issues ($n = 9$), having baby to sleep in a separate room or bed ($n = 6$), creating a sleeping routine ($n = 5$), and sleeping through the night ($n = 4$); feeding issues ($n = 21$) including getting child to eat ($n = 10$), preparing food or offering healthy food options ($n = 10$), eating without the TV ($n = 2$), creating an eating pattern, and finding food supplements; other issues including bathing ($n = 3$), changing baby’s clothes ($n = 2$) and diapers ($n = 2$).
- Medical issues: a few parents mentioned they found it challenging dealing generally with medical situations or health issues ($n = 5$); others mentioned specific difficult situations such as avoiding colds (flu), not having a second opinion when worried about baby’s health, not having a convenient doctor, difficulty following vaccination schedules due to conflicting doctors’ opinions.
- Logistical issues: keeping up with children’s schedules and being committed to sports and practices ($n = 12$); keeping up with house chores or keeping house neat ($n = 7$); traffic and crowded transportation ($n = 3$); driving with baby in the car, preparing baby’s

bag, getting baby ready on time; leaving baby play and not carry/hold him all the time, leaving children with grandparents to be able to go out; travelling.

- Social and safety matters: going out or finding places/activities for children ($n = 11$), keeping children entertained at home and/or outside ($n = 4$), finding safe trustworthy outing places ($n = 3$), ensuring children's happiness, keeping an eye on the child throughout the day, raising children in a corrupted society, creating a safe environment, and taking decisions about child's future.

Education. A lot of parents found difficulty when it came to their children's education. Many simply mentioned "education" ($n = 9$) as a challenge or "studying" and schoolwork ($n = 8$). Others parents were more specific and mentioned things like:

- School related issues: children's lack of commitment to studying or being good at school ($n = 5$), a lot of stress due to lots of studying, and not enough time for studying. Parents themselves faced issues like choosing good or trustworthy schools or nurseries ($n = 4$), dealing with bullying at school ($n = 4$), lack of support from school ($n = 2$), corruption in school admissions, and high school fees.
- Other educational issues: Teaching children various things ($n = 13$) such as new skills, to talk, self-confidence, responsibility, the value of things, how to socialize, not to be racists or accept differences, letting go of the dummy; teaching independence or raising children to be independent ($n = 5$); potty training ($n = 3$); answering existential questions ($n = 3$); answering child's "too many questions"; guiding or coaching and giving feedback ($n = 3$); helping child identify goals in life.

Discipline. The majority of parents found difficulty in deciding how to discipline their children or in enforcing discipline. Some ($n = 10$) simply mentioned “discipline” as a challenge and others were more specific and mentioned things like:

- Maintaining a balance: some parents ($n = 6$) were struggling to create the balance between being lenient, gentle, friendly or respectful to child’s freewill and being strict, serious, and directive; and a few ($n = 3$) were just having trouble how not to spoil their children.
- Instilling discipline and making or enforcing rules: setting rules or borders, being strict or maintaining control ($n = 11$); dealing with bad behavior or actions ($n = 8$); instilling principles and manners or teaching right from wrong ($n = 6$); when and how to punish or enforce consequences ($n = 3$); when and how to start disciplining ($n = 3$); positive discipline ($n = 3$); and being consistent.
- Dealing with particular situations: child’s stubbornness ($n = 20$); child’s tantrums or anger ($n = 9$); siblings fights ($n = 8$); child neglectfulness or ungratefulness ($n = 5$); child nagging and whining ($n = 2$); accepting that the child can say no, and spouse spoiling children.

Negativity. Some parents were struggling with negative behavior such as anger management or controlling temper ($n = 13$); lack of patience or tolerance ($n = 7$); shouting or yelling at children ($n = 4$).

Other. There were some responses did not clearly fit under any of the seven parent role characteristics. They can be grouped into the below categories:

Knowledge about parenting and child development. This included dealing with sibling jealousy ($n = 9$); generally understanding child psychology, development, or needs ($n = 8$); how

to raise a good or “perfect” child ($n = 6$); peer pressure and the impact of friends, or problems with friends ($n = 4$); dealing with a bullied child ($n = 4$), dealing with a shy, sensitive or nervous child ($n = 4$), dealing with a hyperactive or special needs child ($n = 2$); dealing with cranky behavior or cries ($n = 2$), parenting techniques and positive parenting ($n = 2$); character development ($n = 2$). Other topics that were mentioned include how to treat children equally and/or account for the difference in their personalities ($n = 3$); how to create a daily routine ($n = 2$); how to deal with older family members or in-laws or other parents who interfere with parenting one’s children in ways not accepted by parents or who break the parent’s rules or the daily routine ($n = 2$); how to raise a lone child who is not selfish; how to bridge the generation gap and understand children’s mindsets; how to keep children motivated to do their best; how to develop the child’s potentials in every possible way; how to manage when child becomes too demanding; how to ethically raise children; how to agree on the same parenting method with spouse. One parent was struggling with asking her children for perfection although she is not perfect and also needed support with loving unconditionally. Another was wondering how to deal with her own personality and its effects on the way she parents. And one father was wondering how his child can put him at the same level as his mother because he felt he was in second place.

Time, fatigue, and self-care. A common complaint among parents ($n = 32$), especially working mothers, was lack of time or facing challenges related to time. This included general time management issues or not having enough time ($n = 13$); coordinating or making a balance between work, baby or home ($n = 13$); no personal free time “me time” ($n = 10$). Some parents were more specific and mentioned particular things that they need more time to do such as spending quality time with child ($n = 6$); finding enough time to listen or play with child ($n = 4$);

activities or going out with child ($n = 3$); rest, de-stress, or recharge ($n = 3$); balancing being a good mother and a beautiful woman and/or a human and/or a wife ($n = 2$); giving attention to both children ($n = 2$); and learn or gain knowledge about children. Besides this time struggle, some parents ($n = 7$), mentioned lack of sleep and some ($n = 8$) also felt lack of freedom or lack of energy or increased stressor fatigue/tiredness.

Support system. Some participants ($n = 23$), mainly mothers, mentioned that they lacked support or needed help in certain areas. This included not finding babysitters ($n = 7$); lack of husband's support ($n = 4$); not having a support system, emotional support, or a supporting community; no support with housework or chores ($n = 3$); unable to rest due to lack of support ($n = 3$); no support in raising twins; no parenting groups where parents can share; not having someone to take care of the child when sick and parent has to go to work. Two mothers explained they had to leave her work due to the absence of babysitting and lack of trust in daycare for young infants. One single mother was yearning for a trustworthy place to gain support on how to raise a child as a single parent. And one parent simply said s/he felt alone.

Miscellaneous. Some parents mentioned other difficulties. For example, some parents ($n = 12$) were having a challenge limiting or preventing watching TV or use of gadgets (phones, tablets, iPads, smartphones... etc) or technology, or access to social media and online arenas that allow early social interaction; some ($n = 4$) mentioned financial issues. A few parents ($n = 4$) felt that there was a negative impact on their children due to living in a materialistic culture, or the pressure of children showing off, or the exaggeration of spending on clothes or outings, or the bad behavior of people. Three participants found that "religion", "consistent praying", or being "spiritually led" are challenges but did not elaborate. One participant found it hard to be a co-

parent and two struggled with being single mothers. And finally, one mother was struggling with weight loss.

Parenting Education Needs

Parents were asked if they had ever attended formal parenting classes in Egypt and if they did, where and about what. They were also asked if they would be interested in attending a program that provides parenting sessions and family activities and what sessions they would be interested in attending to support them as parents.

Eighty-three percent 83% of the participating parents had never attended formal parenting classes in Egypt. Those who attended classes mentioned either their formal education such as pediatrics, child psychology or child counseling; or specified organizations that gave the classes such as Positive Parenting, IMF Center, CLC (Creative Learning Center), LRC (Learning Resource Center), Dr. Marlene Bastawrous clinic, Safe (Safe Kids Egypt), or their churches, or their children's schools or nurseries.

Eighty-two percent of the participants indicated they were interested in attending parenting sessions. They were then asked to choose the topic(s) that would support them as parents. The topic that was chosen the most was child psychology and development (85%, $n = 123$), followed by reward and punishment (58%, $n = 84$), raising a safe child (how to prevent violence and abuse)(58%, $n = 84$), engaging family activities (games and activities, cooking classes, competitions, ...)(52%, $n = 76$), support groups for mothers (25%, $n = 36$), and finally support groups for fathers (9%, $n = 13$). Four participants specified other topics that they were interested in, namely positive parenting, basic healthcare, first aid sessions, and how to raise responsible children who would be positive contributors to their community.

Participant Suggestions

At the very end of the survey, the participants were asked to write any comments or suggestions that they think would be helpful in creating a parenting program. Only a few participants ($n = 17$) answered this question. Some ($n = 9$) thanked the researcher, or commented on the study or the survey itself, that they liked it, found it useful, wanted to receive the results, or had difficulties completing the survey. The rest gave some suggestions/comments such as: (a) a component on how a parent's personal history can impact the way they parent, stating that "how you parent your child is directly related to how you were parented and if a person does not have a general understanding of how this plays out in their interaction with their kids, no parenting how-to's will be effective enough"; (b) one participant wrote that the website <http://www.smartparenting.com.ph/> can be useful; (c) "focus on providing new and trustworthy" workshops since there are individuals who "take silly courses online thinking it suddenly makes them a child psychiatrist when in fact it's very obvious that the person has no credentials". That participant also suggested that the focus of the program or workshops should be something practical for parents and something that brings them together because "mothers in Egypt yearn for a place to meet others (other mothers)"; (d) a program should cover practical topics and said "the more realistic and applicable will be more efficient" and suggested always using real examples; (e) other suggestions from parents included "tailoring a program for parents of children with special needs", creating a bond between parents and schools to support in parenting efforts, "teaching parents how to enjoy time with their kids (because) parenting is not only about feeding, cleaning, buying and getting money", creating online classes to be convenient for working parents, dedicate a section in the program for grandmothers "as they spend lot of times with kids and tend to break all rules".

Discussion

The Egyptian parents who participated in this study exhibited some knowledge about child development, parenting and disciplining that needed further development. , Specifically, there were gaps in their knowledge about their children's developmental stages and age appropriate behavior, as well as how to discipline effectively and how to show love without spoiling. They showed an interest in increasing their skills and level of knowledge and an eagerness to attend parenting classes. Their parenting and disciplining styles were not consistent with Western findings that distinguish between laxness and over-reactivity; they seemed to be able to combine being loving, harsh and permissive. They valued bonding as a parenting characteristic the most, yet they did not value responsivity and sensitivity which are generally seen as essential to bonding. They also seemed to be more focused on general welfare and protection, education and discipline, than on bonding, when they were asked about their strengths and especially struggles. The parents were diverse in their perceptions of their parenting strengths and weaknesses; for example, the strengths that were mentioned by some were others' challenges.

Participants' Knowledge and Education Needs

Knowledge of child development. Participants mainly learned about parenting from reading online materials and books or from family and friends. Only six percent stated that they acquired their knowledge from attending formal parenting classes, although later on in the survey, 17% of the parents indicated that they had attended a parenting class. Parents exhibited a fair amount of knowledge about their children's development. Over 75% of the parents knew that a child's capacity to learn is not determined at birth, that children learn more from real people than TV, that play has a positive social and intellectual effect, when children start

imaginary play, when infants start to walk, when children should be given crayons, when children start saying single words, when parents should start talking to their babies, when parents should start teaching colors or numbers, that three year olds should not be expected to sit quietly for a long time, and that a five year old should choose their own clothes. They might have learned such information from the other sources that they specified such as books, their own parents, or online materials.

However, overall their knowledge was far from comprehensive and most certainly needs to be developed. For example, almost half of the parents did not know information such as that brain development starts in the uterus; that what children experience during the first year of life has an impact on their school performance; that children should start holding a spoon or fork and attempt to feed themselves between nine and 12 months; or that children should start looking at books by the age of four to six months; and a third of the parents thought 15-month olds would easily share toys with their siblings or other children. Also, even though most parents were talking about bonding as the most important parenting characteristic, almost half of the participants thought that rocking a one year old child to sleep is likely to spoil him/her and that a six month old is not too young to spoil. Hence, it might be that Egyptian parents believe that bonding, which entails loving and showing affection to your child, is important, but they are not completely aware of how it is implemented or they are partly afraid that spoiling a child might be a consequence of showing love.

The section of the survey that dealt with the parents' knowledge about child development did not cover all aspects of child development but it clearly showed that even though the participants do have some knowledge, they also have some misconceptions. However, it would be unfair to claim that the Egyptian parents participating in this study had less knowledge than

their counterparts in other countries. When the Caregiver Knowledge of Child Development Inventory, from which 12 questions were adapted and used in this study, was administered to Turkish mothers, their knowledge was also far from perfect (Ertem et al., 2007). Actually, Egyptian mothers and fathers had fewer incorrect answers on all the questions except for two; when a child starts to walk and play imaginary play but this might be because in this study the participants were given three answers to choose from while the Turkish participants were asked to come up with the age on their own. As for the remaining eight questions in this section that were adapted from the baseline survey of parents in Arizona Family and Community Survey on Early Childhood (FTF, 2009), the Egyptian participants also showed more knowledge except for one question in which 49% of Egyptians versus 20% of Americans thought that a child's first year does not impact their school performance. Again, it is important to note that the Egyptian participants are a small sample of high socioeconomic and educational standard, but the results we are comparing to are the mean results for all participants from Arizona, a much broader sample that included parents from high and low SES and only 25% had an undergraduate or graduate university degree.

Even though Egyptian parents scored higher on knowledge than Turkish mothers, there were still many who had misconceptions that could affect their interpretations of their children's behaviors and their interventions with their children, potentially with a negative impact on their children's development. For example, those who do not understand that a 15 month old is unlikely to share toys, or that a three year old is unlikely to sit quietly for an hour; might consider that as misbehavior and try to discipline the child although they are perfectly normal behaviors that do not require any intervention. Similarly, those who are unaware that play has an effect on language development or that they should provide the child with enriching experiences during

the first year of life, will not put the effort into such things which could negatively affect the child's later social and intellectual performance. Also, there were parents who did not know basic milestones such as when a child should start walking or sitting without support. This might mean that some parents would not spot early on if a child is having a problem that needs intervention. Hence there is a need for parent education on child development. It was also clear that the parents were aware of this need and were eager to learn about child development. When they were asked about the sessions they are interested to attend in a parenting program, child psychology and development came in first place.

Knowledge about discipline and child abuse. Other areas that the parents were interested to learn about were reward and punishment and how to raise a child safe from abuse. Parents' interest in gaining more knowledge about how to reward and punish is in line with their perceptions of the challenges they face as parents. When parents responded to the questions about their parenting strengths and challenges, there were around 35 mentions of strengths related to discipline but almost three times as many mentions of challenges related to discipline. Some parents were struggling with disciplining their children in general and some were facing issues in particular situations. Their interest in knowing more about child abuse prevention is also in line with the high levels of child abuse in Egypt where over 60% of children are exposed to physical violence, over 70% exposed to emotional violence, and 2-6% exposed to sexual violence with more than 67% of girls reporting sexual harassment (UNICEF, 2015). There were also recent incidents of child sexual abuse that were announced in the news and on social media that definitely raised the concerns of parents and encouraged them to learn more on how to protect their children.

Parents showed less interest in family activities and even less interest in attending support groups for mothers or fathers. That was inconsistent with what a lot of parents mentioned in their challenges. They said that there are not enough outings that are child friendly. Mothers also had a lot of challenges with managing their time; being tired, exhausted, and stressed; and maintaining a balance between their work and their children and homes. Mother support groups would obviously provide them with support, encouragement, empathy, and in some cases solutions. An explanation for their lack of interest in attending mother support groups may be time limitations or unawareness of the positive effects of support groups, so it will be important to address these issues when creating parenting interventions.

Participants' Parenting and Disciplining Styles

The parenting and disciplining styles of the participants were assessed using the Parenting Scale and the Parent Behavior inventory. Participants were also asked to explain what they perceived as their strengths as parents and their challenges or the areas in their parenting that they thought needed development and support.

Assessment of parenting and disciplining styles. Egyptian parents who participated in this study were assessed on three parenting and disciplining styles; their laxness or permissiveness, their overreactivity or harshness, and their supportiveness or engagement. These three styles correspond to Baumrind's parenting typology of permissive, authoritarian, and authoritative styles (Baumrind, 1971), and cover most of the PDTs parent role characteristics except for maybe general welfare and protection.

The Parenting Scale has been established as a reliable and valid measure of laxness and overreactivity. However, this did not hold in an Egyptian context, as it showed relatively poor reliability for both factors. Also, the confirmatory factor analysis showed that the participants'

identification of laxness and overreactivity was not congruent with the model that the scale was proposing. The analysis showed that four out of the 21 items did not belong to either factor, and four items that were supposed to measure laxness loaded on the overreactivity factor instead making factor 1, and two items from overreactivity loaded on the laxness factor making factor 2.

Factor 1 in the confirmatory analysis united behaviors from overreactivity such as getting into arguments with the child, giving long lectures, and raising voice and yelling, with giving fair threats or warnings that end up not doing, letting go or doing things by oneself when child wouldn't listen, letting child do something that parent said cannot do, and giving in to the child when s/he gets upset if parent says no. Even though it combines laxness and overreactivity, this factor is not a balance between being kind and democratic and being firm as in authoritative parenting; it is rather a combination of the extremes of permissive and authoritarian styles, hence it can be called pseudo-authoritative parenting.

Factor 2 more closely followed the recognized definition of laxness. It joined items such as making unrealistic threats and not following through, letting child do whatever s/he wants, coaxing and begging child to stop, letting child get away with more when outside home, letting go when child misbehaves, and offering child something nice to behave, with two items that normally load on overreactivity; being picky and on child's back when upset (negative correlation), and using bad language when child misbehaves.

The exhibited pseudo-authoritative style is unique to the Egyptian participants and could not be explained rationally when compared with Western findings. However, the combination of overreactivity and high engagement is consistent with literature that explains that authoritarian parenting in authoritarian countries does not necessarily entail negative feelings towards the child, the parent can be authoritarian and loving at the same time (Dwairy & Menshar, 2006;

Rudy & Grusec, 2006). This is not only unique to Egypt, it applies to any collectivist or authoritarian culture. For example, a study about parenting styles in Arab societies also showed combined parenting styles; a controlling style which is a combination of authoritarian and authoritative parenting, flexible style combining authoritative and permissive parenting, and an inconsistent style combining permissive and authoritarian parenting (Dwairy et al., 2006). The inconsistent parenting type, which corresponds to the pseudo-authoritative parenting that the participants of this study exhibited, was found in Egypt and in all Arab societies included in the study. Hence, in order to create a successful parenting program, one must take into consideration that parenting is different across cultures and that what works or does not work in Western countries will not necessarily be the same in Egypt.

Unlike the Parenting Scale, the Parent Behavior Inventory was an appropriate measure with the Egyptian participants and exhibited high reliability. When it came to assessing how supportive and engaged the participants were with their children, it turned out that they were doing very well in this area. On a scale of one to five and out of the ten practices that measured the level of parental engagement and supportiveness, the lowest mean score was 3.54 and the overall mean was 4.21. The scale was mainly measuring how often the parents were expressing their love and emotions towards their children, encouraging them, having fun, communicating, and also sensing their feelings and responding to their needs, as well as guiding, and teaching them. The participants' high scores are consistent with their choice of bonding as the most important parent role characteristic but not with deeming responsiveness and sensitivity as less important. Also when we compare the participant score to the scores of a diverse American sample (Weis & Toolis, 2010), we will find that Egyptians had higher scores in the two questions that entailed physical expressions of love such as kissing and hugging, but had lower scores in

the remaining eight questions especially the four questions that encompass teaching, guiding, playing and communicating. This might be that Egyptians are more emotional, or that they value the affectionate side of bonding and consider expressing love as more important than being supportive. This is consistent with their viewing responsivity and sensitivity as less important than bonding.

Participants' perceived parenting strengths and struggles. Some parents were unable to identify their strengths or struggles. This might be interpreted that they never had the chance to think about their parenting, or that they do not believe it is something worth thinking about, or that they do not know what qualifies as good or bad parenting. There were over 180 mentions of strengths related to bonding and almost no challenges. This is consistent with the parents' choice of bonding as the most important parenting role characteristic. It is also in line with their high scores on the Parent Behavior Inventory supportive/engaged parenting style. However, this is not consistent with their knowledge about bonding since many of them wrongfully thought that some manifestations of bonding would lead to spoiling their babies such as rocking a one-year old to sleep. So even though they have the intention to love their children and create strong attachments with them, their lack of knowledge about child psychology and development may counter their intention. Also about 25 parents were struggling with negativity issues like inability to control temper, yelling at children, and lack of patience; behaviors that contradict with bonding. Moreover, there were only about 30 mentions of strengths related to the responsivity and sensitivity characteristics such as listening or trying to understand the child more, which is in line with the parents' choice of these two characteristics as least important after negativity. Again, this goes against choosing bonding as a priority. There was a positive indication of parents' interest in responsivity and sensitivity that was clear in their eagerness to learn about various

topics of parenting and child psychology that pertain to being responsive and sensitive, such as dealing with jealousy, dealing with certain child personality traits, and understanding their children more.

When it came to the other three parent role characteristics; general welfare and protection, education and discipline; parents found strengths and faced challenges. In general, parents were somewhat more confident in their ability to take care of their children's needs than struggling to take care of them. There were over 90 mentions of being able to take care of children's physical needs especially feeding and only about 60 mentions of struggles, especially with sleeping. Over 100 mentions of strengths dealt with of being able to meet children's social and safety needs, and about 50 challenges were with meeting these needs. The same applied to educating children; there were almost 85 mentions of strengths and almost 60 challenges. Interestingly, parents had more belief in their own abilities to teach and educate their children than in the formal education and schooling system. This entailed more struggles than strengths especially when it came to studying and finding good schools.

It was the other way round when it came to discipline; which had about 35 mentioned strengths versus almost 100 challenges. As explained earlier, this is consistent with the desire of parents to learn more about reward and punishment through a parenting program. Also, many parents were struggling with having their children "obey" them and considered this some form of stubbornness, which is consistent with the general authoritarian culture (Dwairy & Menshar, 2006; El Safty, 1979). Others were facing a dilemma between disciplining, loving and spoiling; they wanted their children to be disciplined but they did not want to be too directive and aspired to be friendly but not too lenient and were worried they would end up spoiling their children. Also, in their pursuit for discipline, some parents were also struggling with losing their temper,

not being able to control their anger and ending up shouting and yelling. All this was reflected in the Parenting Scale results which showed a combination of the overreactivity and laxness factors.

Spirituality, religion, and God related issues were mentioned in the strengths and challenges but only eight times which is quite a small frequency for Egyptians who are usually considered religious. Eight participants were trying to limit their children's use of technological devices and gadgets, and another twelve found it a challenge. Finally, there were almost 40 mentions, mainly from mothers, of struggling with time or not having enough time for various aspects of parenting or for self. Mothers were also complaining from not having a support system, which is probably causing or at least amplifying their time complaints.

When we look at all the strengths and struggles in aggregate, it is clear that the parents were diverse in their perceptions of their parenting strengths and weaknesses; for example some were struggling with disciplining their children while others perceived it as their strength. Also some of them had more knowledge than the others. This may be explained by differences in their constructions of their parent role perceptions. As the PDT explains, any variations in parent, the child, the parent-child relationship, the family dynamics, and the social or cultural milieu directly affect parent role perceptions (Krocheck & Mowder, 2012; Mowder, 2005; Mowder, 2006; Sperling & Mowder, 2006). Then these differing perceptions act as a guide to their behaviors. So parents in the same community or even in the same family could parent in different ways, as they may have had different experiences that led to different constructions of their parenting roles. A parenting program must take into account these individual differences.

Some of the difficulties that parents mentioned facing cannot be addressed through a parent education program but are rather general problems in the community or country. For example, many parents complained about not having enough safe, entertaining, clean, affordable,

child friendly places to take their children to. Others were struggling due to the high expenses in general, or the high school fees, or the scarcity or even absence of baby sitters in Egypt. Even though these and others are very valid complaints, they are beyond the reach of a parent education program or parenting classes.

Recommendations for an Egyptian Parenting Program

Based on the overall analysis of the results, it is clear that Egyptian parents do need a comprehensive parenting program that would fill the gaps in their knowledge about child development, would create a balance in their disciplining style, would enhance their parenting strengths, and support them with their struggles. This program will need to include the below educational modules:

- **Child psychology and developmental stages:** this module would provide information to parents on the cognitive, emotional, physical, and social developmental milestones and stages of their children. This will explain to parents what to expect from their children, assist them in spotting any developmental delays early on for intervention, and support them in recognizing their children's talents to nurture them. It would eliminate misconceptions about children's intentions and behaviors. The module would also introduce them to the concept of attachment and explain its importance and how it is created to reverse their misunderstandings or confusion about bonding and spoiling their children.
- **Parenting theories and disciplining styles:** this module would familiarize parents with the various parenting theories such as Baumrind's Typology and the Parent Development Theory. The purpose would be to describe to parents how the parent role and perceptions about it are created, and what the different types of parenting and discipline are, and in

theory what effect would each one have on them and their children, discussed in the context of Egyptian culture

- Positive parenting and positive discipline: this module would introduce parents to the meaning of positive parenting and discipline as well as give them tips and simplify how they can adopt them in dealing with their children. We must not forget the effect of the Egyptian culture and the differences in the way Egyptians conceptualize parenting when we are introducing positive parenting. The culture and hence the parenting are authoritarian and as explained earlier that in collectivist and authoritarian cultures, authoritarian parenting is rarely associated with negative affect (Dwairy & Menshar, 2006; Rudy & Grusec, 2006) so it does not have as much undesirable effects as it would have on a Western child. The role of the program would not be to deem the current parenting practices as ineffective but to point out its strengths and build on them. For instance, we must keep in mind that parents will continue to expect obedience from their children, so the purpose of positive parenting would be to suggest positive ways of instilling obedience as opposed to the use of harshness or violent methods. It should not for example highlight nurturing independence as opposed to obedience but maybe explain that they are not necessarily conflicting.
- Time management, soft skills, and self-care basics: this module would give parents tips on time management and a variety of soft skills such as listening, communication, negotiation and emotional intelligence. A topic like the languages of love might also be introduced to open the parents' eyes that love and bonding can be expressed in various ways. Many of these topics would already be touched upon in positive parenting but some parents might need to go into more details in each topic. The module would also

familiarize parents with self-care techniques to enable them to recharge every now and then and deal with stress. It should be emphasized that they must take care of themselves in order to be able to carry on taking care of their children.

- Workshops, open discussions and question sessions with specialists: this module would allow parents to choose topics they feel they need to learn more about. It is essential that parents are allowed to go through the program sessions and feel that they are not just receivers of information but that their input is also valued. Each group of parents might have different needs and a special workshop or discussion would be arranged accordingly. For example, a few participants in this study mentioned that they would like to learn more about first aid for children.

Since there are no comprehensive parenting and family support programs in Egypt, it would be ideal to have a holistic project that not only provides parents with the above educational modules but also a center or organization that offers overall support to parents by addressing their struggles in all of the contexts of parenting. For such a program to make a true impact, it needs to address parenting on various ecological levels; the microsystem, mesosystem, exosystem and the macrosystem (Bronfenbrenner 1979, 2000). Successful child-focused parenting cannot ignore the effect of the parent-child relationship and the family dynamics (Mowder, 2005, 2006) which constitute the microsystem; the effect of the children's daycare or school, parents' work, friends, extended family members, access to healthcare (the meso- and exo- systems); and the overall effect of culture and values (the macrosystem). Parents have already touched upon all these aspects in their description of their strengths and struggles. Hence, this intervention should not disregard all that and only focus on providing information. It should act as a destination that parents could go to when they need psychological support or family

counseling, a place that offers child friendly activities that allows families to spend affordable and fun quality time, and a haven for mothers that gives them the space to take care of themselves by providing various activities for women or self-care services and parallel babysitting or children's activities. It should also act as a hub and provide access to other service providers that have an effect on parenting such as a network of pediatricians or schools, and engage in advocacy and policy work on behalf of parents.

Limitations and Suggestions for Future Research

The main limitation of the study is that the survey was done online and in English so the participants targeted were not representative of the majority of the Egyptian population. The participants were of higher social, economic and educational levels. Hence, the suggestions made for the parenting program are targeting the same population. To be able to create a parenting program for poor or uneducated people, who make up the majority of the Egyptian population, a new assessment has to be conducted. It is likely that poor parents would not have access to online parenting materials, that they would not have the language skills to read English parenting materials, or even that they would not have the adequate literacy level to read even Arabic parenting sources. Hence, it is probable that their level of knowledge about child development and parenting will be lower. In addition to their level of knowledge, poverty and parental low level of education are associated with parenting problems and child and adolescent mental health problems (Spencer, 2003). The struggles and challenges of poor parents would also be different than the participating group of parents. For example, they would have more financial issues (only four participants in this study mentioned financial struggles) and trouble providing for their children's needs, problems with extended families, and safety issues if they live in unsafe

neighborhoods. A successful program addressing parents from lower socioeconomic standards would have to assess and take into account these different needs, resources, and cultures.

Another limitation is that some survey participants found some of the questions of the survey to be unclear or confusing. For example, some of the participants who were using certain browsers or using mobile phone access were unable to view the section of the Parenting Scale properly. Hence they either did not continue the survey or answered the section to the best of their understanding to be able to continue. In addition, the survey participants' children's ages ranged from 2 months to 12 years which is a relatively big range. Some parents, especially those of younger children, had not yet experienced some of the situations that the survey was asking them about. They had to answer the questions hypothetically. Also due to the low reliability of the Parenting Scale, it is suggested that a different measure be used in understanding Egyptian parents' discipline styles. And the interesting finding of the pseudo authoritative parenting needs to be further studied and explored to have more accurate understanding of Egyptian parenting.

It is also worth noting that participants were not asked about their children's gender nor that they should think about only one child while completing the survey bearing in mind that the child's age and gender would have an impact on parenting behaviors. Also the analysis did not include the difference between father's and mother's answers. So it is suggested that further research would take into account the effect of child's gender on parenting behaviors and perceptions with specific focus on differential treatment between boys and girls, and gender schemas and gender roles that are instilled during childhood. Also it is important to understand the involvement of fathers in parenting their children and the difference between mothers' and fathers' parenting styles.

Overall, this is an exploratory study that touched upon a number of aspects of Egyptian parenting and raised a lot of questions. As this has been an under-researched area, it will take many studies to develop a comprehensive picture of parenting in Egypt. As we learn more about parenting in Egypt, the accuracy and effectiveness of programs addressing parents' needs will increase.

Conclusion

Parenting is a very important role that a person assumes as soon as they are blessed with a child but that is dealt with through a schema that has been in the person's mind since childhood. This schema grows and is affected by culture, experience, and knowledge among other factors. The effect of parenting on children and parents' wellbeing is immense so parents must be given a lot of support to be able to do more good than harm, even when they have good intentions. Parenting and parent education programs are effective tools in aiding parents. They bridge the gaps in parents' knowledge about parenting and child development, and help them deal with their children more effectively. Egyptian parents have incomplete knowledge about their children's development and needs and demonstrated inconsistencies in parenting and disciplining styles. They have many strengths and struggles and have shown the need and the interest in attending parenting classes. It is suggested that an Egyptian parenting program that is culturally sensitive and offers a variety of educational topics, as well as support to parents across ecological levels can be an effective strategy for improving the quality of parenting. Further research is required to understand parenting in Egypt in more depth and with greater accuracy and the components of the suggested program should be revisited whenever new findings and needs come to light.

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Appendix A

Questionnaire

Project Title: Parenting in Egypt: Recommendations for an Egyptian Parenting Program

Principal Investigator: Amira Ragy Saad Hanna [amira.ragy@aucegypt.edu]

You are kindly requested to participate in this research study that is taking a step towards understanding Egyptian parents and creating suggestions for an Egyptian parenting program that caters for their needs.

The expected duration of your participation is 15 to 30 minutes.

If you are a parent of a child 0 to 12 years of age, you are requested to complete this survey about your parenting experience.

There are no risks or discomforts associated with this research. There will be benefits to you from this research; as it will stimulate you to think about your parenting style, will give you insights about your parenting perceptions, and will motivate you to learn more about parenting.

The information you provide for purposes of this research is completely confidential and anonymous; meaning no one, even the researcher, will be able to identify you as a participant. Your opinions and true experiences are very important so please ensure that your answer reflect what you really think and do. The aggregate findings from this study may be presented at a conference or workshop or used in the creation of an actual parenting program.

If you have any questions about the research or your participation in the study, please contact Amira Hanna at amira.ragy@aucegypt.edu or Dr. Carie Forden at cforden@aucegypt.edu.

Participation in this study is voluntary. You may discontinue participation at any point in time and withdraw from the survey without penalty.

Thank you very much for your time and support.

If you are at least 18 years of age and a parent of a child 0 to 12 years of age, please check “I Agree” and click on the “Continue” button below as an online signature and to start the survey.

I Agree

A) How do Egyptian parents perceive their parenting strengths, weaknesses and needs?
– 11 items

ABOUT YOU:

1. Are you a parent of a child 0-12 years of age?

- Yes
 No. You do not have to finish this survey. Thank you for your time.

2. Gender

- Male
 Female

3. Age

- a. 18-25
b. 26-30
c. 31-35
d. 36-40
e. 41-50
f. 50+

4. Where do you live? (*please specify the area, for example: Heliopolis*)

-
- Heliopolis or Nasr City
 Obour City
 Sherouk City
 Tagamo3 (first to fifth settlements)
 6 October City
 Mohandessin or Dokki
 Zamalek
 Maadi
 Downtown Cairo
 Other

5. How many children do you have?

- 1

- 2
- 3
- 4
- 5
- More than 5

How old is each child? (*please specify the age in years, or months if the child is less than a year old*)

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____

6. What are the three things you do best as a parent?

- 1. _____
- 2. _____
- 3. _____

7. What are the three main challenges you face and need support with as a parent?

- 1. _____
- 2. _____
- 3. _____

8. As a parent, what are your main sources of knowledge or support in parenting your child(ren)?

- a. Formal classes
- b. Informal support from family and friends
- c. TV programs
- d. Books
- e. Online materials
- f. Other, please specify _____

9. Have you attended formal parenting classes in Egypt?

- Yes, Please specify place & topic(s)
- No

10. If there is a program that provides parenting sessions and family activities, would you be interested to attend it?

- a. Yes (please answer question 11)
- b.No

11. What sessions would you be interested in attending to support you as a parent?

- a.Child psychology and development
- b.Reward and punishment
- c.Raising a safe child (how to prevent violence or abuse)
- d.Engaging family activities to help family members' bonding (eg. cooking classes, games and crafts, competitions, ...etc)
- e.Support groups for mothers
- f. Support groups for fathers
- g.Other, please specify

B) Parents' Knowledge of Child Development – 20 items

THE FOLLOWING SECTION WILL ASK YOU ABOUT YOUR CHILD(REN)'S DEVELOPMENT"

1. When does a child's brain begin to develop and learn?
 - a. **Prenatal (in the uterus before birth)**
 - b. Between 1 to 3 months of age
 - c. Around the time they turn a year old

2. When do children first begin to say single words?
 - a. From 1 to 6 months of age
 - b. **Between 9 months and 1.5 years of age**
 - c. When they are 2 years or older

3. When do children first begin to play imaginary play like feeding a doll or driving a toy car?
 - a. From 1 to 6 months of age
 - b. **Between 1 and 2 years of age**
 - c. When they are 3 years or older

4. When do children first begin to grasp tiny things, like raisins, with their fingertips?
 - a. From 1 to 3 months of age
 - b. **Between seven and nine months of age**
 - c. When they are 1 year or older

5. When do children first begin to walk alone with good co-ordination?
 - a. By 6 months of age
 - b. **Between 10 and 15 months of age**
 - c. When they are 2 years or older

6. When should parents first begin talking to children?
 - a. **Prenatal (in the uterus before birth)**
 - b. Between 1 to 3 months of age
 - c. When they are 1 year or older

7. When should parents first begin teaching children numbers and colors?
 - a. Within the first six months after birth
 - b. **Between 1 and 2 years of age**
 - c. When they are 3 years or older

8. When should parents start to give children a spoon or a fork to let them eat by themselves?
 - a. From 3 to 6 months of age
 - b. **Between 9 and 12 months of age**
 - c. When they are 2 years or older

9. When should parents begin to give children paper and crayons to draw and color?
 - a. From 3 to 6 months of age
 - b. Between 1 and 2 years of age**
 - c. When they are 3 years or older

10. When should parents begin to let children sit with support?
 - a. Within the first 2 months of age
 - b. Between 3 and 4 months of age**
 - c. When they are 9 months or older

11. When should parents begin to look at children’s books with their children?
 - a. From 4 to 6 months of age**
 - b. Between 1 and 2 years of age
 - c. As they are closer to school age

12. When will events occurring to the child impact his/her school performance?
 - a. Starting the first year**
 - b. Between 2 and 3 years of age
 - c. When s/he is 4 years or older

13. Is a child’s capacity to learn determined at birth or can factors affect it later on in the child’s life?
 - a. At birth
 - b. Later on**

14. Do children learn as much from interactions with real persons as they do from TV programs?
 - a. Equally from both
 - b. More from real persons**
 - c. More from TV programs

15. For each of the following, please put a mark in the box you think is right:

How much impact does playing have on:	Very big impact	Big impact	Minor impact	No impact
A child’s social development?				
A child’s intellectual development?				
A child’s language development?				

16. A 15 month-old should easily share her/his toys with her/his siblings or other children.
 - a. Yes
 - b. No**

17. A three year old should easily sit quietly for 1 hour.
 - a. Yes
 - b. No**

18. A six month old child is too young to spoil.
- a. **Yes**
 - b. No
19. Rocking a one year old to sleep is likely to spoil her/him.
- a. Yes
 - b. **No, it is appropriate**
20. Letting a 5-year-old choose what to wear every day is likely to spoil her/him.
- a. Yes
 - b. **No, it is appropriate**

Appendix A – Questionnaire *contd.*

C) Laxness and Overreactivity/Hostility factors of the Parenting Scale (Arnold, O’Leary, Wolff, & Acker, 1993) – 11 and 10 items respectively

At one time or another, all children misbehave or do things that could be harmful, that are “wrong”, or that parents don’t like. Examples include: hitting someone, whining or complaining, damaging things, forgetting homework, leaving things lying around, lying, being over-emotional, refusing to follow requests, breaking family rules, swearing, taking other people’s things, staying out late.

Parents have many different ways or styles of dealing with these types of problems. Below are items that describe some styles of parenting. For each item, choose the number that best describes your style of parenting during the past 2 months with your child.

Item from Scale	Factor
1 When I’m upset or under stress... <i>I am picky and on my child’s back</i>	OR
1 2 3 4 5 6 7	
<i>I am no more picky than usual</i>	
2 When my child misbehaves... <i>I usually get into a long argument with my child</i>	OR
1 2 3 4 5 6 7	
<i>I don’t get into an argument</i>	
3 I threaten to do things that... <i>I am sure I can carry out</i>	LX
1 2 3 4 5 6 7	
<i>I know I won’t actually do</i>	
4 I am the kind of parent that... <i>sets limits on what my child is allowed to do</i>	LX
1 2 3 4 5 6 7	
<i>lets my child do whatever he or she wants</i>	
5 When my child misbehaves... <i>I give my child a long lecture</i>	OR
1 2 3 4 5 6 7	
<i>I keep my talks short and to the point</i>	
6 When my child misbehaves... <i>I raise my voice or yell</i>	OR
1 2 3 4 5 6 7	
<i>I speak to my child calmly</i>	
7 When I want my child to stop doing something... <i>I firmly tell my child to stop</i>	LX
1 2 3 4 5 6 7	
<i>I coax or beg my child to stop</i>	
8 After there’s been a problem with my child... <i>I often hold a grudge</i>	OR
1 2 3 4 5 6 7	
<i>things get back to normal quickly</i>	
9 When we’re not at home...	LX

- | | | | | | | | | | | |
|----|--|----------|----------|----------|----------|----------|----------|----------|---|----|
| | <i>I handle my child the way I do at home</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I let my child get away with a lot more</i> | |
| 10 | When my child does something I don't like...
<i>I do something about it every time it happens</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I often let it go</i> | LX |
| 11 | When there's a problem with my child...
<i>things build up and I do things I don't mean to do</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>things don't get out of hand</i> | OR |
| 12 | When my child misbehaves, I spank, slap, grab, or hit my child ...
<i>never or rarely</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>most of the time</i> | OR |
| 13 | When my child doesn't do what I ask...
<i>I often let it go or end up doing it myself</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I take some other action</i> | LX |
| 14 | When I give a fair threat or warning...
<i>I often don't carry it out</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I always do what I said</i> | LX |
| 15 | If saying "No" doesn't work...
<i>I take some other kind of action</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I offer my child something nice so he/she will behave</i> | LX |
| 16 | When my child misbehaves...
<i>I handle it without getting upset</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I get so frustrated or angry that my child can see I'm upset</i> | OR |
| 17 | When my child misbehaves and then acts sorry...
<i>I handle the problem like I usually would</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I let it go that time</i> | LX |
| 18 | When my child misbehaves...
<i>I rarely use bad language or curse</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I almost always use bad language</i> | OR |
| 19 | When I say my child can't do something...
<i>I let my child do it anyway</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I stick to what I said</i> | LX |
| 20 | When my child does something I don't like, I insult my child, say mean things, or call my child names...
<i>never or rarely</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>most of the time</i> | OR |
| 21 | If my child gets upset when I say "No"...
<i>I back down and give in to my child</i> | <i>1</i> | <i>2</i> | <i>3</i> | <i>4</i> | <i>5</i> | <i>6</i> | <i>7</i> | <i>I stick to what I said</i> | LX |

Appendix A – Questionnaire *contd.***D) Supportive/Engaged Scale of the Parent Behavior Inventory** (Lovejoy, Weis, O'Hare, & Rubin, 1999) – 10 items

Sr.	Supportive/Engaged Items of the Parent Behavior Inventory	Rate the frequency of the below behaviors in the past week				
		1 (Not at all true) I did not do that at all this week	2 I rarely did that this week	3 I occasionally did that this week	4 I frequently did that this week	5 (very much true) I did that all the time this week
1	I have pleasant conversations with my child					
2	I try to teach my child new things					
3	My child and I hug and/or kiss each other					
4	I laugh with my child about things we find funny					
5	My child and I spend time playing games, doing crafts, or doing other activities together					
6	I listen to my child's feelings and try to understand them					
7	I thank or praise my child					
8	I offer to help, or help my child with things s/he is doing					
9	I comfort my child when s/he seems scared, upset, or unsure					
10	I hold or touch my child in an affectionate way					

Appendix A – Questionnaire *contd.*

E) How do Egyptian parents perceive their parent role as defined by the PDT?

1. Please rank the below characteristics from 1 to 7 based on their importance to you as a parent (*one being the most important and 7 the least important*)

Rank (1 – 7)	Characteristic	Definition
	Bonding	Your expressions of positive feelings and actions of love and affection to your children
	Discipline	Your establishment of rules and limits to your children and the measures you take to ensure the limits set are respected
	Education	Your passing of information to your children in the forms of teaching, guiding, advising, leading by example... etc
	General welfare and protection	Your provision for your children’s basic needs, ensuring their health and safety, and protecting them from any kind of harm
	Responsivity	Your ability to recognize your children’s calls and needs and respond to them (beyond the general welfare basic needs)
	Sensitivity	Your ability to sense and understand correctly what your children need (without them calling out) and respond to the needs appropriately
	Negativity	Your use of harsh parenting methods such as yelling or being or exercising verbal, psychological, or emotional hostility

2. Do you think your ranking would remain constant or would change as your child grows? Why?

- i. Would remain constant
- ii. Would change

Please explain your choice _____

