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Super Parents is a group-based, Extension-led parenting program developed to enhance the parent-child relationship. Implemented by trained Head Start staff using the train-the-trainer model, this effort is achieved by teaching positive parenting practices, increasing parents' knowledge of child development, instructing parents in activities and exercises for enhancing their child's executive function skills, and encouraging the use of mindfulness techniques in parenting. The specific aims of our study were to evaluate the program's effectiveness among parents of young children ages 0 to 5 by examining changes in parenting attitudes, mindfulness, executive function, parenting efficacy, stress, and child behavior. Through the use of pre-program and post-program measures, increases were observed in a number of positive parenting behaviors and child outcomes, along with decreases in multiple negative parenting and child behaviors. Findings from this study can inform implementation decisions of other parenting programs or trainings administered by Extension educators.

Keywords: parenting, intervention, executive function, responsive parenting, mindfulness

Introduction

In the early 1990s, a team of parent education specialists from the Cooperative Extension Service developed the National Extension Parent Education Model (NEPEM; Smith et al., 1994; see also DeBord et al., 2006). This model was developed to give educators a common ideology, approach, and universal terms to consider when developing, implementing, evaluating, and

replicating parent education programs. The NEPEM was constructed around six categories of parenting skills: self-care, understanding, guiding, nurturing, motivating, and advocating. With this model as a guide, parent education programs in Extension have become numerous and address many different challenges that parents can face, including parenting adolescents (Abell & Ludwig, 1997; Allen et al., 2014), nutrition and obesity prevention (Benke et al., 2013), increasing parental involvement (Catchpole & Arnett, 2014), and literacy training and reading enhancement (Brandon et al., 2018; Zapata et al., 2020).

This article introduces a group-based Extension-led parenting intervention that uniquely couples positive parenting techniques found in the 1,2,3,4 Parents! program (Popkin et al., 1996) with stress-reducing mindfulness techniques and brain-building activities for parents to use with their young children to enhance executive function/self-regulation skills. This parenting intervention, known as Super Parents, was designed for parents with children under the age of 5 and holds promise for Extension educators who wish to help parents build strong relationships with their children while promoting healthy self-regulation skills.

While a wealth of benefits have been attributed to parent education programs and interventions, including increased positive parenting behavior, deepened knowledge of child development, and greater confidence in parenting (Morris et al., 2020), recent literature has suggested various ways in which mindfulness behaviors can benefit parenting, including reducing parenting stress (Jespersen et al., 2021) and increasing parents' capacity to focus on childrearing efforts (Coatsworth et al., 2010). Mindfulness is conceptualized as the self-regulation of attention and non-evaluative acceptance of present experiences (Campbell et al., 2017). Considering outcomes associated with parenting stress, recent literature has noted it as being a major social and environmental risk factor that can contribute to a number of adverse child outcomes, including increased externalizing behavior such as aggression (Costello et al., 2014), childhood anxiety (Rodriguez, 2003), and diminished social and emotional functioning in terms of social cognition and emotional coping (Crum & Moreland, 2017; Lopez et al., 2011). To combat these issues, however, research has revealed that mindfulness training can contribute to positive child outcomes in terms of reduced emotional distress (Britton et al., 2010), increases in optimism and positive emotionality (Schonert-Reichl & Lawlor, 2010), and improved social competence (Harnett & Dawe, 2012). As such, parent education programs that can enhance positive parenting behavior and knowledge while also diminishing levels of parenting stress (e.g., through mindfulness training) could effectively mitigate the adverse effects of stress on parent and child functioning.

In addition to mindfulness, executive function is an area in which parenting programs and interventions have received additional content in recent years (Morris et al., 2020). Executive function and self-regulation skills are the mental processes that enable individuals to focus attention, process instructions, plan, and perform goal-oriented behavior (Hofmann et al., 2012), and these skills begin developing in the earliest stages of childhood. The noted increase in

programming related to executive function and self-regulation is due to their key role in child behavior modification, along with the finding that executing function skills tend to stabilize by early adolescence (Deater-Deckard, 2014). Moreover, emphasis on the development of executive function skills in early childhood has been found to be associated with resilience (Diamond & Lee, 2011) and academic achievement (Bull et al., 2008). Additionally, parents with elevated executive function skills tend to be more responsive and nurturing in their parenting while being more likely to initiate interactions with their children (Treat et al., 2019), while parents with lower levels have been found to utilize harsher parenting practices (Deater-Deckard et al., 2012).

With these factors in mind, Extension educators can use Super Parents as a model for incorporating scientifically grounded practices (in this case, mindfulness and executive function training) into the implementation of evidence-based interventions to address the particular needs of their community members better while adhering to guidelines outlined in the NEPEM model.

Program Development and Modification

Super Parents is unique in comparison to other Extension-developed interventions in two ways. First, it infuses mindfulness training with parenting skills training to enhance parent and child behavior by first training the parent and then encouraging the parent to train their child. Practicing mindfulness offers several benefits in the context of parenting. For example, parents who practice mindfulness are better able to focus their attention, intentionally self-regulate emotion in the context of the parent-child relationship, and remain aware of emotions for both the self and child (Coatsworth et al., 2010). Specific mindfulness exercises included in the program are activities such as controlled/deliberate breathing, where parents are instructed to take a moment to breathe deeply to regain control of their emotions and thereby lower their stress levels. Another activity called the Mind Jar presented parents with a jar filled with liquid and glitter to teach parents to separate their parenting experiences from worries and distractions (glitter), which cloud the clarity of the liquid. These mindfulness activities are taught to the parents within each program session to give them new tools to enhance their own mindfulness behavior. Furthermore, parents are encouraged to take these newly acquired skills and teach them to their children to enhance their child's self-regulation skills.

The next unique feature of the Super Parents program is its focus on teaching parents the importance of executive function (EF) skills and providing exercises and activities for enhancing EF in their own children. The Super Parents program seeks to strengthen EF in participants' children by introducing parents and caregivers to a number of brain-building games within each program session. The activities designed to enhance EF processes included Simon Says-type games, freeze dance, and memory and attention games. Importantly, parents were given information about how these "games" help build their children's brains and were encouraged to try them in their homes.

In addition to encouraging parental mindfulness and providing guidance for developing executive function and self-regulation abilities, educators presented positive parenting practices via 1,2,3,4 Parents! that parents could implement in their own families. Responsive, or positive, parenting has been identified as a key factor in influencing the developmental trajectory of young children's executive function and social-emotional development (Baumrind, 1966; Holden et al., 2014). Practices associated with responsive parenting include considering what the child is experiencing in their interactions with parents, providing consistent levels of warmth and acceptance, nurturing feelings of acceptance as a unique individual, and providing consistent responses to the child's cues (Morris et al., 2013).

By building executive function, teaching mindfulness practices, nurturing and modeling positive parenting techniques, and encouraging self-care in accordance with the NEPEM model, it was posited that the Super Parents intervention would be an effective parenting program that Extension educators could implement to influence parenting attitudes, parenting efficacy, parental executive function, and mindfulness in positive ways. It was also posited that improvement in each of these areas could contribute to increasing parents' ability to nurture their relationship with their young child and aid in building their child's executive function and social-emotional skills.

This study had two primary hypotheses based on the various content focuses of the Super Parents program:

- 1. Parents would report increases in their own positive parenting attitudes, parenting efficacy, executive function, and mindfulness behavior, with decreases in parenting stress at the completion of the program when compared to their scores collected at the beginning.
- 2. Parents would report increases in their child's prosocial behavior and decreases in conduct problems and hyperactivity at the completion of the program when compared to their scores collected at the beginning.

Method

This project was led by one Extension educator who assembled both a development team, which consisted of university researchers, parents, family advocates, and mental health specialists, and an evaluation team, which consisted of university researchers and graduate students. The project development team oversaw the modification of 1,2,3,4 Parents! into what became Super Parents. This program was implemented over three years. In the first year, the development team presented the program to parents in three Head Start schools in a southern state. These parenting sessions were attended by parents and school staff members. Attendance by staff members served as a portion of training for the staff who would continue to implement the program in future sessions following the development phase. Training was implemented and perpetuated

within each of the Head Start schools using the train-the-trainer model. In the second year, the development team worked closely with the Family Advocates and Mental Health Specialists at these schools and provided additional training on the presentation and evaluation of Super Parents, as the advocates and specialists became responsible for presenting and evaluating the program in their own schools after the second year. Data included in this article came from the third year of implementation, where Family Advocates and Mental Health Specialists began leading program sessions for parents and staff independently. The Oklahoma State University institutional review board reviewed and approved the study described in this article.

Sample

The sample included 68 participants (55 parents and 13 staff members; 25% Spanish-speaking; 88.2% female; 33.3% Caucasian, 22.2% African American, 33.3% Hispanic, 4.8% Native American, 6.4% Other; 80.7% biological mothers; 31.1% single-parents). Fifty-eight (58) completed both pre-and post-test measures, and 51 completed both the pre-test and 3-month follow-up measures. Parents (not staff) reported about the behavior of a target child in the 0–5 age range (M = 2.63, SD = 1.42).

Procedures and Measures

Trained staff members at each Head Start school (i.e., Family Advocates, Mental Health Specialists) implemented Super Parents through six interactive 2-hour sessions utilizing the video-based Active Parenting 1, 2, 3, 4 Parents! curriculum, which focuses on positive, responsive parenting, child development, and self-care. These Active Parenting sessions were enhanced with content related to the previously outlined principles of mindfulness and executive function development, including the breathing activities and glitter jar to encourage mindfulness and the brain-building games and exercises to strengthen executive function. Over three years across the three Head Start schools, the program was offered a total of eight times in English. Additionally, two trained Head Start staff members implemented a version of the program that had been translated into Spanish with one group of Spanish-speaking parents.

In addition to program implementation, the evaluation team developed identical pre-tests and post-tests using measures related to parenting approaches and attitudes, perceived parenting stress, executive function, and mindfulness. The team administered pre-tests at the beginning of the first program session and post-tests at the conclusion of the sixth session. In addition, the evaluation team scheduled follow-up data collection (post-test) three months after the participants' final session. Of the 58 participants who completed the program, 50 were available for the three-month follow-up, resulting in a retention rate of 86%. The specific measures utilized can be found in Table 1 (parent outcomes) and Table 2 (child outcomes). In addition to these measures, the post-test included questions regarding participants' impressions of the Super Parents program.

Table 1. Measures for Parent Outcomes

Construct	Measure	Citation	Sample Item	Score Range
Positive Parenting	Parenting Young Children	McEachern et al., 2012	"Speak calmly with your child when you are upset with them."	1 – 5
Self-Efficacy	Parenting Self- Agency Measure	Dumka, Stoerzinger, Jackson, & Roosa, 1996	"I feel sure of myself as a mother/father."	1 – 4
Executive Functioning	Brief Behavioral Rating Inventory of Executive Function	LeJeune, Beebe, Noll, Kennedy, Isquith, & Gioia, 2010	"I don't plan ahead for tasks."	1 – 3
Mindfulness	Cognitive and Affective Mindfulness Scale	Feldman, Hayes, Kumar, Greeson, & Laurencean, 2007	"I am able to focus on the present moment."	1 – 4
Parenting Stress	Parental Stress Scale	Berry & Jones, 1995	"I feel overwhelmed by the responsibility of being a parent."	1 – 5

Table 2. Measures for Child Outcomes

Construct	Measure	Citation	Sample Item	Score Range
Conduct Problems	Strengths and Difficulties Questionnaire	Goodman, 1997	"Often loses temper."	1 – 3
Hyperactivity	Strengths and Difficulties Questionnaire	Goodman, 1997	"Restless, overactive, cannot stay still for long."	1 – 3
Prosocial Behavior	Strengths and Difficulties Questionnaire	Goodman, 1997	"Often offers to help others (parents, teachers, other children)."	1 – 3

Results

As shown in Table 3, paired samples *t*-tests comparing pre-test and immediate post-test measures showed significant increases in positive parenting attitudes, parenting efficacy, parent mindfulness, and a marginal decrease in parenting stress. Additionally, parents reported that their children experienced significant increases in prosocial behavior and significant decreases in conduct problems and hyperactivity.

Table 3. T-tests Comparing Pre-test and Post-test Measures

	Pre-	test	Post	test		
Variable	M	SD	M	SD	N	t
Parent Outcomes						
Positive parenting attitudes	16.91	8.07	21.09	7.34	58	4.87***
Parenting efficacy	3.29	.54	3.47	.38	53	2.47**
Parent executive function	2.30	.31	2.33	.30	57	1.27
Parent mindfulness	40.35	6.48	41.91	6.72	57	1.68*
Parent perceived stress	1.74	.57	1.64	.57	56	-1.39 ⁺
Child Outcomes						
Child conduct problems	1.40	.37	1.32	.29	45	-1.82*
Child hyperactivity	1.99	.47	1.73	.37	45	-4.19***
Child prosocial behavior	2.41	.40	2.63	.29	45	4.09***

Note. *p < .05.

Similarly, *t*-tests comparing the pre-test and the three-month follow-up data revealed significant increases in positive parenting attitudes, parenting efficacy, parent executive function, and a decrease in parenting stress. Additionally, significant increases were observed in child prosocial behavior, with significant decreases in child conduct problems and child hyperactivity (see Table 4).

Table 4. T-tests Comparing Pre-test and 3-month Follow-up Measures

	Pr	<u>etest</u>	3-mont	h Posttest		
Variable	M	SD	M	SD	N	t
Parent Outcomes						
Positive parenting attitudes	15.94	8.01	17.44	7.72	50	1.69*
Parenting efficacy	3.32	.63	3.59	.50	49	3.13**
Parent executive function	2.28	.34	2.40	.35	50	2.07*
Parent mindfulness	41.14	8.04	42.57	8.30	51	1.12
Parent perceived stress	1.79	.60	1.60	.62	50	-2.18*
Child Outcomes						
Child conduct problems	1.40	.36	1.31	.30	51	-2.27*
Child hyperactivity	1.98	.46	1.75	.47	51	-3.71***
Child prosocial behavior	2.40	.38	2.51	.42	51	1.84*

Note. *p < .05.

Further, regarding their impressions of the program, nearly all participants rated the overall experience of the Super Parents program as good (21.3%) or excellent (76.6%). Additionally, participants largely rated the program as applicable to their families. Finally, when asked about the program's best features, many participants discussed similar content aspects, including mindfulness activities, new parenting techniques, executive function games, and learning the importance of self-care.

Discussion

The pre-test to post-test evaluation (see Appendix) of the Super Parents program suggests that parents developed positive attitudes toward parenting, increased their feelings of efficacy in parenting, and enhanced their ability to practice mindfulness. In terms of child outcomes, the findings indicate that children displayed significant increases in prosocial behavior as well as significant decreases in child conduct problems and hyperactivity, as reported by their parents. Considering the Super Parents program's unique approach related to mindfulness, other parenting programs designed to foster mindfulness have found similar outcomes in regard to parenting stress, including the Mindfulness-Based Childbirth and Parenting Program (MBCP), which has been found to reduce parenting stress and postpartum depression mothers (Lönnberg et al., 2020), as well as the Mindfulness-Based Positive Behavior Support (MBPBS) program, which has been found to reduce parenting stress while also decreasing child behavior problems (Singh et al., 2006). It is notable, however, that the number of available parenting programs utilizing mindfulness practices designed for parents of young children is scant (Morris et al., 2020; Singh, 2021). The positive findings from this study illustrate the need for additional intervention programming related to mindfulness and stress reduction for parents of young children, a combination not yet readily available in the current state of parenting programs and interventions.

Several studies have indicated that educating parents about specific parenting practices can influence overall parenting attitudes. For example, presenting parents with information describing healthy alternatives to corporal punishment can lead to parents showing less approval of such practices (Holden et al., 2014; Taylor et al., 2017). In the case of the Super Parents program, learning about the beneficial outcomes associated with positive parenting and mindfulness techniques may have contributed to enhanced overall positive parenting attitudes, a limitation discussed further below.

The pre-test to three-month follow-up findings were similar to the pre-test to post-test findings for both parents and children. Unique to the data collected for the three-month follow-up, significant differences in parental executive function were found. Considering Super Parent's unique focus on building executive function, a wealth of research has indicated that parental executive function may be a factor of notable consideration when seeking to enhance parenting behavior and attitudes and positive child outcomes (Blair et al., 2014; Cumming et al., 2022; Gonzalez et al., 2012). The relative consistency in findings going from pre- to post-survey and pre-survey to three-month follow-up is very promising as it shows that parents' perceptions of improvements did not diminish over that time period. It should be noted, however, that without additional reminders or re-training, mindfulness behavior gains from parenting programs have been found to diminish (Lönnberg et al., 2021). Future studies could follow up on these findings at later time points, including six months to a year.

Despite encouraging findings from our study, there are several limitations to consider. First, parents were not randomly assigned to conditions, and there was no control group, limiting conclusions about effectiveness. Additionally, data were all self-reported, and the sample was not particularly large. Moreover, relying solely on parent reports for both their own attitudes and their child's behavior introduces the possibility for positive attribution and social desirability biases, where parent perceptions of the positive aspects of the program may have influenced their responses about both themselves and their child (Caputo, 2017). As such, future evaluation efforts should consider the addition of a behavioral observation component or a third-party (e.g., teacher, school staff member, etc.) respondent to enhance the validity of survey results. Nevertheless, preliminary findings from this study provide initial evidence of the effect of combining an evidence-based parenting curriculum (1,2,3,4 Parents!) with other science-based practices (i.e., mindfulness and executive function training) to meet community needs and achieve positive parenting and child outcomes.

Conclusion

The National Extension Parenting Education Model (NEPEM; Smith et al., 1994) endorsed group-based parenting programs. We found evidence of this in our parenting groups as we noted significant increases in positive parenting attitudes and parenting efficacy/confidence in parenting skills. The Super Parents intervention, designed by coupling the positive parenting techniques in 1,2,3,4 Parents! with the stress-reducing and cognitive skills of mindfulness (Hölzel et al., 2011) and executive function (Traverso et al., 2015), holds great promise for helping parents and children build strong relationships and healthy self-regulation skills. Additionally, this program meets the criteria for the six themes outlined in the NEPEM, including teaching self-care through offering support to parents and aiding in managing parental stress; understanding by helping parents observe and understand their child's development; guiding through teaching parents how to model desired behavior and set reasonable limits; nurturing through emphasizing and expressing affection and compassion and listening to their child's feelings and ideas; motivating by teaching parents how to help their child process and manage information through executive function skills; and advocating by stimulating supportive and cooperative family environments. Our findings indicate that the Super Parents program, designed to improve parenting attitudes, executive function, and mindfulness in parenting, had many of the posited positive effects on multiple parenting and child outcomes. These findings provide a foundation for the implementation of similar parenting programs or trainings by Extension educators in other states. Further, they provide a template for combining community partnerships with scientifically grounded practices to meet the particular needs of communities and the families within them (Coatsworth et al., 2010).

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Appendix

Pre/Post Assessment

Demographic Questionnaire

1.	Are you current	ly:		5.	What is your	annual ho	ousehold income?
		Married				\$10,000	or less
		Divorced				\$10,001	to \$20,000
		Widowed				\$20,001	to \$30,000
		Separated				\$30,001	to \$40,000
			ed but living				to \$50,000
		with signific				•	to \$60,000
			ed, not living with				to \$70,000
If x	ou are/were ma	significant o				•	to \$80,000
11)	ou are/were ma	irieu, ioi iic	ow long!				to \$90,000
If s	eparated or div	orced, when	did you separate?				to \$100,000
	-F	,	, and you so promise			Over \$1	00,000
2.	•		the children currently	6.	The highest completed?	level of ed	ucation you
	•	•	r 19 years of age):		omproto.	Grade 6	or Lower
	-		ationship to you, for			Grade 7	
	example: male	, 10 years o	ia, stepson.			Grade 8	
Ge	nder	Age	Relationship			Grade 9	
<u>uc.</u>	<u>inder</u>	<u> 150</u>	<u>Relationship</u>			Grade 1)
						Grade 1	
							2 or GED
							ollege/technical
							e of 2 Year College
							e of 4 Year College
2	D1 :1					Post gra	•
3.	-		the adults, who are 19 currently living in			rost gra	uuate
	•		nd their relationship	7.	Your age:		
	to you or your	child(ren).					
~			.	8. \	Your gender:	Male	Female
<u>Ge</u> :	<u>nder</u>	<u>Age</u>	<u>Relationship</u>			a :	
				9. I	rımary Lang	•	en in the Home:
						English	
						Spanish	

so, what is y		yed? Yes	No			
so, what is y						
	your occup	ation?		10. W	/hat is your	ethnic background? Black/African American Asian American/Pacific Islander White/European American Hispanic/Latino Native American Other (Please Specify):
Your ionship to d:	☐ Mother	☐ Father	Other (specify):			
Demograpl	hics					
low old is yo	ur child? _					
			s or condition	ıs:		
	Black/Afri Asian Ame White/Eur Hispanic/L	can Ameri erican/Paci opean Ame atino	can fic Islander			
i C	Demograph hild 1 birth of the ow old is your of that is your of the own old in the own old i	nild 1 birth date: Demographics hild 1 birth date: ow old is your child? hild's gender: Male ease list child's medica That is your child's ethn Black/Afri Asian Ame White/Eure Hispanic/I Native Am	Demographics hild 1 birth date: ow old is your child? hild's gender: Male Female ease list child's medical diagnose That is your child's ethnic backgro Black/African Ameri Asian American/Paci White/European Ame Hispanic/Latino Native American	Demographics hild 1 birth date: ow old is your child? hild's gender: Male Female ease list child's medical diagnoses or condition That is your child's ethnic background? Black/African American Asian American/Pacific Islander White/European American Hispanic/Latino	Other d: Mother Father (specify): Demographics hild 1 birth date: ow old is your child? hild's gender: Male Female ease list child's medical diagnoses or conditions: 'hat is your child's ethnic background? Black/African American Asian American/Pacific Islander White/European American Hispanic/Latino Native American	Onship to Other d: Mother Father (specify): Demographics hild 1 birth date: ow old is your child? hild's gender: Male Female ease list child's medical diagnoses or conditions: (hat is your child's ethnic background? Black/African American Asian American/Pacific Islander White/European American Hispanic/Latino Native American

Strengths and Difficulties

For each item below, please mark the circle for Not True, Somewhat True or Certainly True of <u>your target child</u>. It would help us if you answered all items as best you can even if you are not absolutely certain.

		Not true	Somewhat	•
1.	Considerate of other people's feelings.		true	true
2.	Restless, overactive, cannot stay still for long	0	2	3
		1	2	3
3.	Often complains of headaches, stomach-aches or sickness	0	2	3
4.	Shares readily with other children, for example toys, treats, pencils	①	2	3
5.	Often loses temper	①	2	3
6	Rather solitary, prefers to play alone	①	2	3
7.	Generally well behaved, usually does what adults request	①	2	3
8.	Many worries or often seems worried	①	2	3
9.	Helpful if someone is hurt, upset or feeling ill	①	2	3
10.	Constantly fidgeting or squirming	①	2	3
11.	Has at least one good friend	①	2	3
12.	Often fights with other children or bullies them	①	2	3
13.	Often unhappy, depressed or tearful	①	2	3
14.	Generally liked by other children	①	2	3
15.	Easily distracted, concentration wanders	①	2	3
16.	Nervous or clingy in new situations, easily loses confidence	①	2	3
17.	Kind to younger children	①	2	3
18.	Often lies or cheats	①	2	3
19.	Picked on or bullied by other children	①	2	3
20.	Often offers to help others (parents, teachers, other children)	①	2	3
21.	Thinks things out before acting	①	2	3
22.	Steals from home, school or elsewhere	①	2	3
23.	Gets along better with adults than with other children	①	2	3
24.	Many fears, easily scared	①	2	3
25.	Good attention span, sees work through to the end	①	2	3

Parenting Young Children (PARYC)

Instructions: Below is a list of activities parents engage in. Rate how often you engage in these activities with your child.

1 2 3 4 5 6 7
Not at all Most of the time

Supporting good behavior	1	2	3	4	5	6	7
1. Play with your child in a way that was fun for both of you?	О	О	О	О	О	О	О
2. Stand back and let your child work through problems s/he might be able to solve?	О	О	О	О	О	О	О
3. Invite your child to play a game with you or share an enjoyable activity?	О	О	О	О	О	О	О
4. Notice and praise your child's good behavior?	О	О	О	О	О	О	О
5. Teach your child new skills?	О	О	О	О	О	О	О
6. Involve your child in household chores?	О	О	О	О	О	О	О
7. Reward your child when s/he did something well or showed a new skill?	О	0	О	0	0	0	О
Setting limits	1	2	3	4	5	6	7
1. Stick to your rules and not change your mind?	О	О	О	О	О	О	О
2. Speak calmly with your child when you were upset with him or her?	О	О	О	О	О	О	О
3. Explain what you wanted your child to do in clear and simple ways?	О	О	О	О	О	О	О
4. Tell your child what you wanted him or her to do rather than tell him/her to stop doing something?	О	О	О	0	О	О	О
5. Tell your child how you expected him or her to behave?	О	О	О	О	О	О	О
6. Set rules on your child's problem behavior that you were willing/able to enforce?	О	О	О	О	О	О	О
7. Make sure your child followed the rules you set all or most of the time?	О	О	О	О	О	О	О
Proactive parenting	1	2	3	4	5	6	7
1. Avoid struggles with your child by giving clear choices?	О	О	О	О	О	О	О
2. Warn your child before a change of activity was required?	О	О	О	О	О	О	О
3. Plan ways to prevent problem behavior?	О	О	О	О	О	О	О
4. Give reasons for your requests?	О	О	О	О	О	О	О
5. Make a game out of everyday tasks so your child followed through?	О	О	О	О	О	О	О
6. Break a task into small steps?	О	О	О	О	О	О	О
7. Prepare your child for a challenging situation?	-	О	О	О	О	О	О

Parenting Self Agency Scale

		Rarely			Always
1.	I feel sure of myself as a mother/father.	①	2	3	4
2.	I know I am doing a good job as a mother/father.	①	2	3	4
3.	I know things about being a mother/father that would be	①	2	3	4
	helpful to other parents.				
4.	I can solve most problems between my child and me.	①	2	3	4
5.	When things are going badly between my child and me,	①	2	3	4
	I keep trying until things begin to change.				

Brief Behavioral Rating Inventory of Executive Function

Please read each of the following statements and rate how often each of the behaviors has been a problem during the past month.

1=Never 2=Sometimes 3= Often

		1	2	3
1.	I am disorganized.	О	О	О
2.	I need to be reminded to begin a task even when I am willing.	О	О	О
3.	I overreact emotionally.	О	О	О
4.	I talk at the wrong time.	О	О	О
5.	I misjudge how difficult or easy tasks will be.	О	О	О
6.	I don't notice when I cause others to feel bad or get mad until it is too late.	О	О	О
7.	I have trouble prioritizing things.	О	О	О
8.	I forget what I am doing in the middle of things.	О	О	О
9.	When people seem upset with me, I don't understand why.	О	О	О
10.	I get emotionally upset easily.	О	О	О
11.	I have good ideas but cannot get them on paper.	О	О	О
12.	My anger is intense but ends quickly.	О	О	О
13.	I start things at the last minute (such as assignments, chores, tasks).	О	О	О
14.	I have difficulty finishing a task on my own.	О	О	О
15.	People say that I am easily distracted.	О	О	О
16.	I rush through things.	О	О	О
17.	I leave my room or home a mess.	О	О	О
18.	I get disturbed by unexpected changes in my daily routine.	О	О	О
19.	I don't plan ahead for tasks.	О	О	О
20.	People say that I don't think before acting.	О	О	О
21.	I have trouble finding things in my room, closet, or desk.	О	О	О
22.	I have trouble doing more than one thing at a time.	О	О	О
23.	My mood changes frequently.	О	О	О
24.	I don't think about consequences before doing something.	О	О	О

Cognitive and Affective Mindfulness Scale – Revised (CAMS-R)

People have a variety of ways of relating to their thoughts and feelings. For each of the items below, rate how much each of these ways applies to *you*.

	1 2 3				4			
I	Rarely/Not at all	Sometimes	Often		Alm	ost alwa	ays	
				1	2	3	4	
1.	It is easy for me to co	ncentrate on what I am doi	ng.	0	0	0	0	
2.	I am preoccupied by t			О	0	0	0	
3.	I can tolerate emotion	al pain.		О	0	О	0	
4.	I can accept things I c	annot change.		О	О	O	О	
5.	I can usually describe	how I feel at the moment	n considerable	О	О	О	О	
	detail.							
6	I am easily distracted			О	О	О	О	
7.	I am preoccupied by t	he past.		О	О	О	О	
8.	It's easy for me to kee	ep track of my thoughts and	d feelings.	О	О	О	О	
9.	I try to notice my thou	ughts without judging them		О	О	О	О	
10.	I am able to accept the	e thoughts and feelings I ha	ive.	О	О	О	О	
11.	I am able to focus on	the present moment.		О	О	О	О	
12.	I am able to pay close time.	attention to one thing for a	a long period of	О	О	О	О	
	unic.							

Parental Stress Scale

The following statements describe feelings and perceptions about the experience of being a parent. Think of each of the items in terms of how your relationship with your child or children typically is. Please indicate the degree to which you agree or disagree with the following items by placing the appropriate number in the space provided.

1 =Strongly disagree 2 =Disagree 3 =Undecided 4 =Agree 5 =Strongly agree

		1	2	3	4	5
1	I am happy in my role as a parent.	О	О	О	О	О
2	There is little or nothing I wouldn't do for my child(ren) if it was	О	О	О	О	О
	necessary.					
3	Caring for my child(ren) sometimes takes more time and energy than I	О	О	О	О	О
	have to give.					
4	I sometimes worry whether I am doing enough for my child(ren).	О	О	О	О	O
5	I feel close to my child(ren).	О	О	О	О	О
6	I enjoy spending time with my child(ren).	О	О	О	О	О
7	My child(ren) is an important source of affection for me.	О	О	О	О	О
8	Having child(ren) gives me a more certain and optimistic view for the	О	О	О	О	О
	future.					
9	The major source of stress in my life is my child(ren).	О	О	О	О	О
10	Having child(ren) leaves little time and flexibility in my life.	О	О	О	О	О
11	Having child(ren) has been a financial burden.	О	О	О	О	О
12	It is difficult to balance different responsibilities because of my child(ren).	О	О	О	О	О
13	The behaviour of my child(ren) is often embarrassing or stressful to me.	О	О	О	О	О
14	If I had it to do over again, I might decide not to have child(ren).	О	О	О	О	О
15	I feel overwhelmed by the responsibility of being a parent.	О	О	О	О	О
16	Having child(ren) has meant having too few choices and too little control	О	О	О	О	О
	over my life.					
17	I am satisfied as a parent.	О	О	О	О	О
18	I find my child(ren) enjoyable.	О	О	О	О	О

IMPRESSIONS OF PARENTING PROGRAM

Thank you so much for your participation in this class!	We want to know	w how useful	this experience was
for you. Please answer the following questions to help	us plan for future	e classes.	

e foli	lowing		
	lowing	scale.	
മപ്പിപ			
anai	ble = N	J A	
escri	bes you	ur expe	rience:
S	Strong	v Agr	DD - 4
	ou ong	y Agr	- T
1	2	3	4
O	О	О	О
O	О	О	О
O	О	О	О
O	О	О	О
O	О	О	О
О	О	О	О
О	О	О	О
1	nts: ce: lescri 0 0 0 0	Strong	1 2 3 0 0 0 0 0 0 0 0 0

What did you like most about the videos?		
Were the home assignments helpful?		
Did the Leader provide enough time for discussion?		
What were the most helpful aspects of the program?		
What could be improved?		
Would you recommend this group to a friend? If no, please explain:	Yes	No
ii iio, piease expiaiii.		
Would you attend another Active Parenting class conducted by this Leader? If no, please explain:	Yes	No