

THE INFLUENCE OF MATERNAL RESPONSIVENESS ON EMOTIONAL HEALTH
AS PERCEIVED BY GRADE 10 STUDENTS IN CUPANG, ANTIPOLO CITY
IN THE PHILIPPINES

BY

YUN, AE-SUN

A Dissertation Presented to

The Faculty of Asia-Pacific Nazarene Theological Seminary

In Partnership with Asia Graduate School of Theology

In Partial Fulfillment of the Requirements for the Degree

PhD in Holistic Child Development

May 2022

ASIA-PACIFIC NAZARENE THEOLOGICAL SEMINARY
IN PARTNERSHIP WITH THE ASIA GRADUATE SCHOOL OF THEOLOGY

WE HEREBY APPROVE THE DISSERTATION

SUBMITTED BY

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ENTITLED

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AS PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE PHD IN HOLISTIC CHILD DEVELOPMENT

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Abstract

This study is quantitative descriptive research regarding Perceived Maternal Responsiveness (Acceptance/Rejection) and Adolescents' Emotional Expressiveness. It investigates the perceived maternal responsiveness and its influence on the emotional health, particularly emotional expressiveness, of Grade 10 students in Cupang, Antipolo City in the Philippines by answering the following sub-research questions: 1) What is the demographic of this group of participants in terms of age, gender, relationship of residing female parent/caregiver, and the number of years residing with a significant female caregiver? 2) Do the mothers of Cupang, Antipolo City in the Philippines demonstrate either acceptance or rejection as measured by CHILD Parental Acceptance-Rejection Questionnaire (PARQ): Mother (Short Form)? and 3) Does the perceived maternal responsiveness, as measured in selected adolescent participants, influence youth's emotional health?

The current study utilized the 'Child Parental Acceptance-Rejection Questionnaire (PARQ): Mother (Short Form)' to measure perceived maternal responsiveness and the 'Emotional Expressive Scale' to measure the participants' emotional health, particularly emotional expressiveness. For data collection, 250 Grade 10 students participated in the current study both online (79 students) and offline (171 students).

Data gathered from the two survey questionnaires yielded the following findings: For the first sub-research question on demographics, there are no significant differences in the response in terms of age and gender. However, in terms of the relationship of

residing female parent/caregiver, those who live with their biological mothers perceived a higher maternal acceptance than those who live with their stepmothers and other female caregivers. For the demographics pertaining to the number of years residing with a significant female caregiver, those living with their significant female caregivers were emotionally more expressive than those not living with any.

For the second sub-research question on whether the mothers of Cupang, Antipolo City in the Philippines demonstrate either acceptance or rejection as measured by CHILD PARQ: Mother (Short Form), the majority response revealed maternal responsiveness styles as acceptance in a target area. According to the participants' demographic profile, 211 of the respondents (84%) live with their biological mothers while five students (2%) reside with their stepmothers and 34 students (14%) with other female caregivers. The researcher focused on maternal responsiveness of significant female caregivers. Thus, the relationship between respondents and their fathers was excluded as it may be a mediating factor.

For the third sub-research question on whether the perceived maternal responsiveness, as measured by the Grade 10 students, influence youth's emotional health, the perceived maternal responsiveness was correlated with the perceived emotional expressiveness.

Hence, to answer the main research question 'How does the perceived emotional responsiveness of a mother/primary female caregiver, as gauged by the responses of the Grade 10 students, influence the adolescents' personal perceived emotional in the Cupang, Antipolo City in the Philippines?', the findings conclude that participants who perceived

a higher level of maternal acceptance showed a higher level of emotional expressiveness than those with a lower level of perceived maternal acceptance. These findings might advocate the importance for significant female caregivers, especially biological mothers, to reside with their sons and daughters, particularly the adolescents as the focus of this study, in order to promote emotional expressiveness as one of the components of emotional health. Furthermore, teachers, counselors, social workers, church, government, and private companies should likewise acknowledge the importance of a strong mother-son/daughter relationship to promote the emotional health. With that being said, it is highly recommended for these institutions to consider thoughtful intervention programs that will encourage and empower mothers to practice warm and supportive acceptance and to increase the adolescents' emotional expressiveness that will nurture their emotional health. For this purpose, the researcher developed curriculum that trained practitioners can use (see Appendices R and S).

Keywords: Perceived Maternal Responsiveness, Emotional Expressiveness, Adolescence

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I, **Yun, Ae-Sun** certify that this dissertation has undergone proofreading and editing by **Eric Jhon E. Auguis**, an authorized proofreader of the **Asia-Pacific Nazarene Theological Seminary**.



Signature of Researcher

April 29, 2021

Date



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DECLARATION

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Yun, Ae-Sun
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May 2, 2021
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Dedication

To my mother, now in heaven, who had nurtured me with her warm, supportive, and attentive acceptance and with sincere prayer.

To my daughters, Susie and Taeyie, who have been giving lots of joy and insights to me and my husband.

To my husband, Kim, Yong-Hoon, who has been giving me warm hugs when I need comfort and who has been supporting me by helping me find Asia-Pacific Nazarene Theological Seminary (APNTS).

To my God,
who has been nurturing me since my birth and protecting me whenever I go through hardships and who has entrusted to me precious children in Grace and Peace Church.

Acknowledgments

I appreciate Dr. Irene Yang, my dissertation adviser for her prayer to strengthen me spiritually and emotionally to complete this dissertation. I give thanks for her consistent, immediate, and active responses and comments to my dissertation amidst her busy schedule and many responsibilities. Her warm support, attention, and acceptance of me fostered my emotional health in the course of writing this dissertation.

I appreciate Dr. Nativity Petallar, my Holistic Child Development program director for leading me from the beginning of this course. She has been my good academic shepherd and guided me on the right way to complete the required courses and this dissertation. Without her guidance and empathic listening, I cannot imagine how I can go through my academic journey in APNTS.

I appreciate my husband Ptr. Kim, Yong-Hoon for his thoughtful encouragement and consistent support for my dissertation writing. He has been my comforter and perfect counselor whenever I felt discouraged. He has been my perfect husband who does his best to lead our family as the head. I am truly grateful for his support and encouragement that have helped me focus on writing this dissertation.

I appreciate my two daughters, Susie and Taeyie for their understanding when I was busy writing this dissertation. I thank them for their helping hands to give me more time to study. I also thank them for their every night prayer to seek God's wisdom and knowledge for me to write this dissertation.

I appreciate the respondents of this survey, the two research assistants, the school principal, Minister Beverly Gebuilaguin, Statistician Prof. Roel Ceballos, the translator,

and Dr. Ronald P. Rohner for showing me their kindness and warm support for my various requests and for helping me conduct this study.

I appreciate my mother, who is now in heaven, for taking care of me with warmth, support, attention, and acceptance when she was still with me. Her life inspired me to understand the importance of maternal acceptance and to write a dissertation on that topic. I am amazed at how God had empowered her to practice the best maternal acceptance responsiveness without any parenting training. She is my role model.

I am so grateful to my two sisters for encouraging me to complete this dissertation. Though I am not with them physically, I can feel their love and prayer for my emotional health and wisdom to write. I appreciate both of them for giving me practical comments coming from their experiences that contributed to my dissertation writing.

Most of all, I give thanks to God and give all the glory to him for granting me to write this dissertation even in the midst of the pandemic. I sincerely appreciate God for leading me to study in AGST-APNTS as I continue to fulfill my responsibilities at home and in the church. I thank God for inspiring me to write this dissertation and comforting me when I struggled with COVID-19. I am so grateful to God for making me realize that he has allowed me to be with many faithful people in my life.

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CHAPTER I

THE PROBLEM AND ITS BACKGROUND

Introduction

When I recall my life as an adolescent, I remember one memory that changed my life in a positive way. After my father passed away, when I, the first child of my parents, was 10 years old, my mother and all my relatives advised me to study hard for a successful life so that I could repay the sacrifices of my mother. For success, in my context, I should enter a famous university. My mother worked hard to support my studies. Unfortunately, unlike the hope of my relatives, I failed to satisfy their expectations. I was not able to pass the entrance exam to those well-known universities, which I took my admission examination. My mother seemed to be disappointed with my low grade but did not express it to me. She encouraged me to do better next time. However, my aunt was different. One day, she called me and said, “You manipulated my sister. Your mom sacrificed everything for your studies, but you failed to satisfy our expectations. You are abusing my sister.”

After that call, I felt that I was useless. I knew she intended to challenge me to study better with the harsh words she had used. However, it was not that moving for me in terms of motivation to focus on my studies. I got deeply hurt and lost the purpose of my life. I considered abandoning my life. Prior to any destructive action, I wanted to confirm the real heart of my mother about my low grades. I wondered if she perceived

me as her failure. When I told my mother the conversation with my aunt, she made a call to my aunt and expressed great anger to her in front of me. It was a short conversation but was strong enough to prove her genuine love towards me. I realized she loved me as myself, not as the means of her life reward. I felt I was precious to her regardless of my poor academic performance. From that moment, I erased my suicidal mindset due to my emotions because after our mother-daughter conversation, my perception of my mother's response to my failure was clarified and this had helped a lot with regard to my emotional health.

As a missionary in the Philippines since 2006, I observed a lot of broken families and their burdened impact on the children. Working with Filipino children and adolescents, their grieving hearts captured my attention. I imagined how their lives would be changed in a positive way if they received the good quality love of a mother. This hope led me to search for the prevalent parental responsiveness in my mission area and emotional health of the children in the research target community where I have been doing my ministry to make positive changes. In this study, the question that will be investigated in Cupang, Antipolo City in the Philippines is the influence of a mother's responsiveness on a youth's emotional health.

Background of the Problem

Adolescence is a developmental stage experiencing physical, social, and emotional changes by transitioning from childhood to adulthood (Jaureguizar et al. 2018, 1). These changes contribute to their cognitive development and abilities to understand abstract concepts like emotion (Hunter et al. 2011, 428-29). Also, adolescents form their identity in multiple contexts and increase their social interaction with peers (Lowe 2003,

213-14). However, adolescents in a transitory period can be vulnerable to risky behaviors and emotional maladjustment (Mercado et al. 2019, 1116; Partridge 2010, 520; Cruz, Laguna, and Mejia-Raymundo 2001, 4). Thus, they need positive and supportive parenting for their holistic development (Jaureguizar et al. 2018, 1; Partridge 2010, 524).

Parents positively influence youth development, including emotional development and positive self-concept, and reduce adolescents' risky behaviors (Beckmeyer, Su-Russell, and Russell 2020, 101-02; Cruz, Laguna, and Mejia-Raymundo 2001, 12-14; Laboviti 2015, 171). However, in the Philippines, three social paradigms: modernization, urbanization, and industrialization, reduce the family influence on the individual, allow more permissive norms and behaviors, and cause the breakdown of the function as the family (Medina 2001, 273-75). These phenomena may cause the possibility of decreasing the parent-youth interaction period and parental influence on the youth (Cruz, Laguna, and Mejia-Raymundo 2001, 1). Also, the pandemic since 2020 has caused several challenges to families.

Psychological distress symptoms refer to negative emotions such as feeling hopeless, restless, gloomy, useless, nervous, and sorrowful (Twenge et al. 2019, 187). Since the COVID-19 pandemic became active in the Philippines in January 2020, Filipinos have experienced those symptoms because of COVID-19 infection or death of family and quarantine (Tee et al. 2020, 380). Worse is that the moderate to mild depressive symptoms (feeling lonely, insomnia, feeling depressed, etc.) and suicidal thoughts are increased among youth (Puyat et al. 2021, 3; 6). According to research conducted with 2,037 participants from March 28 to April 12, 2020, single respondents aged 12 to 21.4 experienced stress, anxiety, moderate to severe depression, and isolation

more than other age groups (Tee et al. 2020, 380, 388). Unfortunately, the numbers of mental healthcare and professionals are insufficient, so people with psychological symptoms cannot access appropriate treatment (Lally, Tully, and Samaniego 2019, 63-64).

Moreover, after the first Enhanced Community Quarantine (ECQ) in Metro Manila and the Luzon on March 16, 2020, many families have suffered from the impact of COVID-19. First of all, the economic crisis hits many families. Among the studied population of 74,061 population (15 years old and above) the unemployment rate in July 2020 was 10.0% (around 7,400 workers). That is 5.4% higher than July 2019. Also, the underemployment rate (employees who were temporarily not at work) was 17.3% in July 2020, which indicates roughly 1.4 million workers (Philippine Statistics Authority 2020). In the survey with 3,600 households in National Capital Region (NCR), 71 % of the respondents who operated micro, small, and medium enterprises had stopped their business during the quarantine period (Economic Policy Research Institute 2020, 15).

Second, it is the consequence of the economic crisis. These economic contractions affect directly the food security of many families. Weekly, families with six family members had spent Php 1,797.06 before the COVID-19, though they needed Php 2,200.80 at least. However, it got worse because the food consumption decreased 34% from Php 1,797.06 to Php 1,184.82 (World Vision Philippines n.d., 7). Food is a basic need for daily life. If food security is challenged, the economic crisis will affect many other needs like health, education, and emotional well-being. For example, during the pandemic, Filipino households experienced a financial hardship that caused disruptions to healthcare, education, and access to clean water and sanitation (United Nations

Children's Fund 2020, 2; 15). These situations brought more suffering to vulnerable children. 463 million students in poverty could not take online classes during the quarantine (United Nations Children's Fund 2020, 9). Children could not get proper nutrition and healthcare (World Vision Philippines n.d., 8-9). Also, children were restricted from playing outside because of the pandemic. It caused them to do more online games (Economic Policy Research Institute 2020, 31). The pandemic also influenced negatively children's mental health (World Vision Philippines n.d., 11; United Nations Children's Fund 2020, 13). Thus, their emotional health also should be considered thoughtfully.

Filipino families struggle with the pandemic impacts such as finance, disruption to basic needs like food and education, increased access to the internet, and emotional health. Thus, it is necessary to examine how emotionally healthy Filipino youth are in changing family structures and their contexts. Specifically, among various issues of emotion health-related issues, the study will investigate the extent of emotional expressivity of Filipino youth and the causal relationship between youth emotion expressivity and their perceived maternal responsiveness.

Theoretical Framework

Ronald P. Rohner, anthropologist and psychologist, developed Parental Acceptance-Rejection Theory (PARTheory) that examines the effect of parental responsiveness. The validity and reliability of this theory has been supported through cross-cultural empirical studies (Rohner, Khaleque, and Cournoyer 2005b, 301-02; Dwairy 2010, 30; Kim and Kim 2015, 368). Rohner, the founder of this theory, officially changed its name to Interpersonal Acceptance-Rejection Theory (IPARTheory) in 2014

to reflect the lifetime application (Rohner 2016, 3) and advised the researcher to use the new name in the dissertation. Thus, the researcher will use the term IPARTheory, not PARTheory (Rohner, email message to author, June 28, 2019; Rohner 2016, 3).

IPARTheory's warmth dimension has two continuums: one is "Parental Acceptance" and the other is "Parental Rejection." As depicted in Figure 1, "Warmth/Affection" is in a parental acceptance group and parental rejection includes three sub-categories such as "Hostility/Aggression," "Indifference/Neglect," and "Undifferentiated rejection." Components to the left of the slash marks (e.g., warmth, hostility, and indifference) in Figure 1 indicate "internal, psychological states of parents" that describe parents' emotion toward their sons and daughters (Rohner, Khaleque, and Cournoyer 2005b, 305; Rohner 2016, 4). Components to the right of the slash marks in Figure 1 (e.g., affection, aggression, and neglect) are parental behaviors reflecting their emotions toward their sons and daughters (Rohner, Khaleque, and Cournoyer 2005b, 305-07; Rohner 2016, 4-5). If parents have warm emotion toward their sons and daughters, they demonstrate their affection through physical (e.g., kiss, hug, fondle, etc.) and verbal expressions (e.g., praise, compliment, say nice things to or about). However, parents will show aggressive actions physically (e.g., hit, bite, scratch, shove, pinch, etc.) and verbally (e.g., curse, sarcasm, belittling, say thoughtless, unkind, cruel things to or about) to their sons and daughters if they have hostility toward them (Rohner, Khaleque, and Cournoyer 2005b, 307).

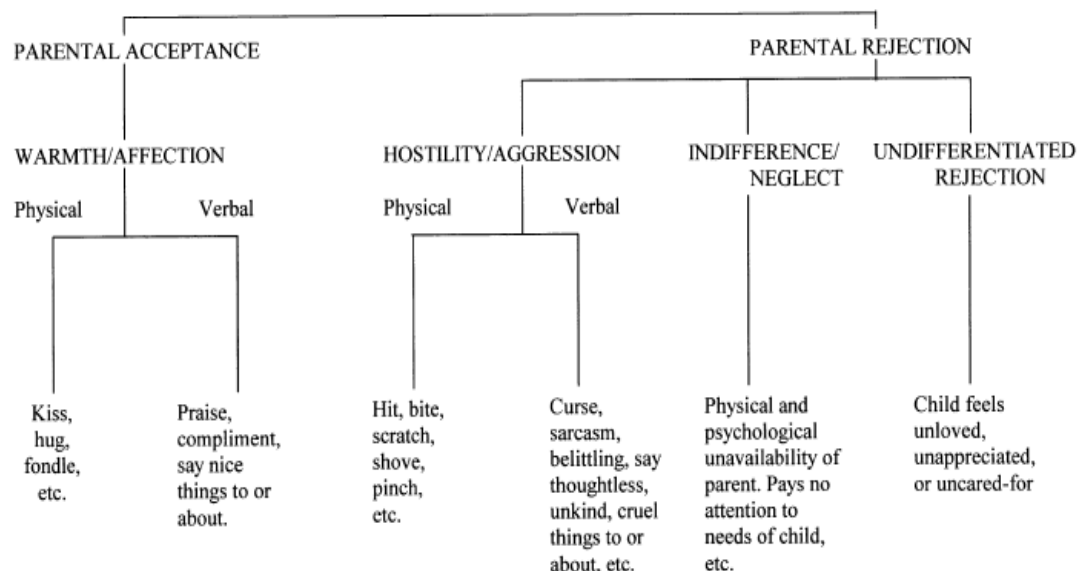


Figure 1: Interpersonal Acceptance-Rejection Theory (IPARTheory)
(Rohner, Khaleque, and Cournoyer 2005b, 306)

In IPARTheory, parental responsiveness (either acceptance or rejection) is regarded as “symbolic” behaviors that sons and daughters may perceive or interpret their parents’ responding actions differently and subjectively according to their cultural and social norms (Rohner, Khaleque, and Cournoyer 2005b, 308-09; Rohner and Lansford 2017, 427; Limanta 2019, 10, 25; Lansford et al. 2010, 11; Rohner 2016, 6). When parents do not meet their social and emotional needs though they receive adequate material and physical needs, their sons and daughters may feel neglected (Rohner, Khaleque, and Cournoyer 2005b, 307; Rohner 2016, 6). Because of the complexity of “neglect,” indifferent emotion of parents toward their sons and daughters may be associated with neglecting behaviors such as physical and psychological unavailability of parent and no attention to needs of the sons and daughters, but not as direct as an association between hostility and aggression (Rohner, Khaleque, and Cournoyer 2005b, 307). It indicates that it is more important to measure how the youth perceive their

parental responsiveness than how their parents perceive their responsiveness to acknowledge their interpretation of maternal responsiveness and its influence on their emotional health. Thus, the researcher will measure the perceived maternal responsiveness toward the adolescents in this study.

Diverse researchers affirm the benefit of parental acceptance. According to this theory, positive parental acceptance is relevantly helpful for the children to develop prosocial behaviors by and increase their emotional health (Gulay 2011, 166; Gardner and Zimmer-Gembeck 2018, 11). Youth may decrease problematic internet use including internet game addiction when their parents practice warm acceptance and accept intervention programs (Diaz 2020; Păsărelu and Dobrea 2018, 107; Kim and Kim 2015, 370). Furthermore, parental acceptance can help youth improve the strategies to solve the social problems (Tepeli and Yilmaz 2013, 588). In contrast, parental rejection causes the child's maladjustment, negative thoughts about the self and the world, and psychological disorder (Rohner 2008, 8-9; Khaleque 2015, 1426; Dwairy 2010, 34; Miranda et al. 2016, 1353).

The consequences of parental acceptance and rejection are related to the issue of dependence and independence. Dependence in IPARTheory means the unstable emotional status, demanding or longing for frequent reassurance and emotional support because of the lack of positive parental response. Independence, the opposite state of dependence, refers to stable emotional status, being free from demanding excessive behavioral bids because of abundant experience of positive responsiveness from a primary caregiver (Rohner, Khaleque, and Cournoyer 2005b, 310-11). Children who experienced positive responsiveness (parental acceptance) show independence and secure

attachment, while rejected children display insecure avoidance, extreme dependence, or negative behavioral dispositions like hostility, aggression, immature emotional regulation, anxiety, etc. (Rohner, Khaleque, and Cournoyer 2005b, 310-11; Hughes et al. 2005, 382-83, 398). IPARTheory explains the influence of parental responsiveness on children's emotional health. Thus, it was chosen as the theoretical framework of this study.

As the acceptance of mothers is related to the child's independence and secured attachment, the researcher expects the child who has a responsive mother would express his or her emotion in a healthy way. In contrast, the child will demonstrate the symptoms such as depression, extreme opposite (the highest or the lowest) dependence, and negative behavioral dispositions if his or her mother engages with him/her with rejecting words and actions. Thus, the sub-research questions will answer whether maternal responsiveness influences adolescents' emotional health.

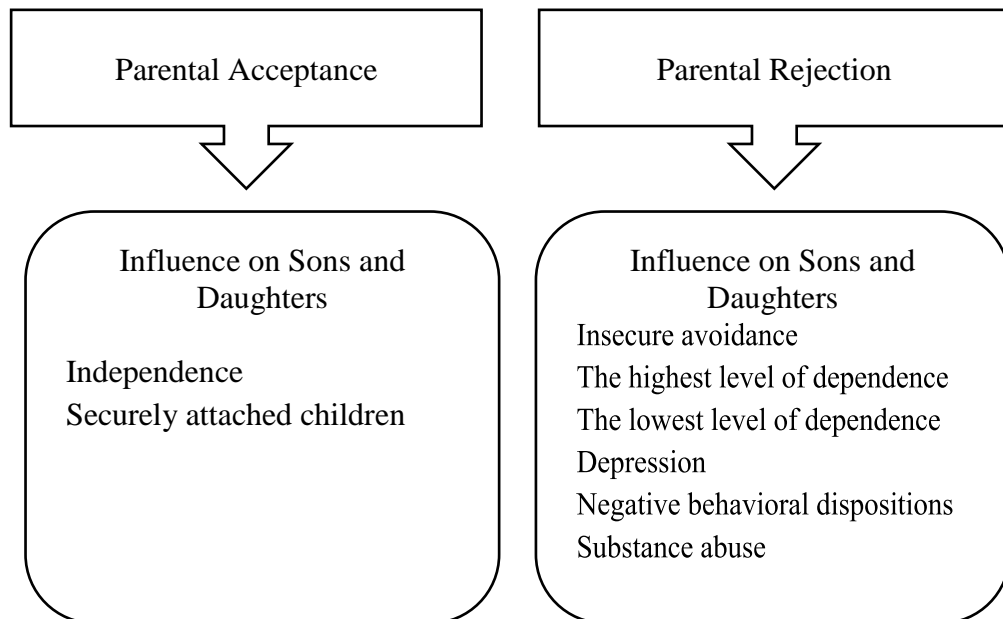


Figure 2: Summary of Influence of Parental Acceptance-Rejection on Children

Conceptual Framework

An independent variable in this study is the perceived maternal responsiveness and a dependent variable is the youth's emotional health. The researcher will examine how the perceived maternal responsiveness affects the youth's emotional health in the current study.

The researcher hypothesizes that maternal responsiveness influences the youth's emotional health more directly than the paternal one. Thus, the perceived maternal responsiveness may have a stronger correlated relationship with youth's emotional health. Thus, the researcher put the major emphasis on maternal responsiveness in the current study and will use the short form of the CHILD Parental Acceptance/Rejection Questionnaire (PARQ) which is titled "CHILD PARQ: Mother (Short Form)" as the research instrument (see Appendix B for English version and Appendix F for Filipino version).

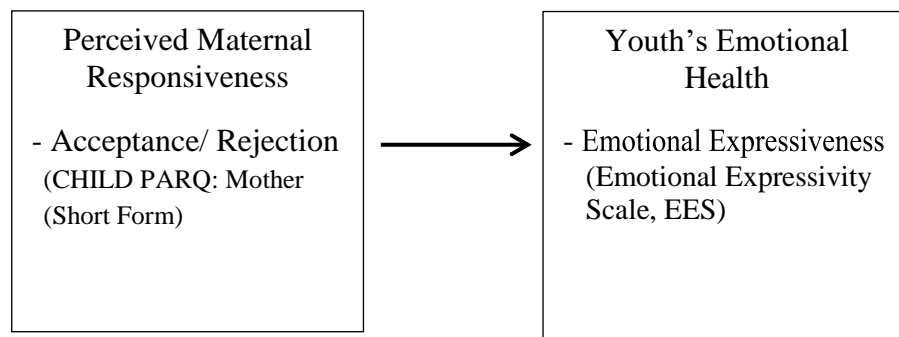


Figure 3: Conceptual Framework

Statement of Purpose

The purpose of this research is to investigate whether or not the perceived emotional responsiveness of a mother/primary female caregiver, as gauged by the responses of Grade 10 students, influences the adolescents' personal perceived emotional

health. In line with this purpose, the researcher will examine whether the emotional health of the child depends on the perceived maternal responsiveness to increase the social awareness concerning the role of the mother to enhance the quality of the child's emotional health.

Statement of the Research Problem

How does maternal responsiveness influence emotional health as perceived by Grade 10 students in Cupang, Antipolo City in the Philippines?

Sub-Research Questions

1. What are the demographic characteristics of the selected Grade 10 students of Cupang, Antipolo City in the Philippines in terms of:
 - a. Age,
 - b. Gender,
 - c. Relationship of resident female parent/caregiver, and
 - d. Number of years residing with a significant female caregiver?
2. Do the mothers of Grade 10 students in Cupang, Antipolo City in the Philippines demonstrate either acceptance or rejection as measured by CHILD PARQ: Mother (Short Form)?
3. Does the perceived maternal responsiveness, as measured by selected Grade 10 students, influence their emotional health?

Statement of Null Hypotheses

1. There is no difference between participant responses to the CHILD PARQ: Mother (Short Form) when compared based on age, gender, the relationship of significant female parent/caregiver, and number of years residing with a significant female caregiver.
2. The mothers/female caregivers of Cupang, Antipolo City in the Philippines, as perceived by selected Grade 10 students, demonstrate neither acceptance nor rejection as measured by CHILD PARQ: Mother (Short Form).
3. Perceived maternal responsiveness does not influence the selected Grade 10 students' emotional health.

Brief Description of the Research Design

This research is quantitative descriptive. It attempted to examine how perceived maternal responsiveness influences the youth's emotional health. To accomplish this objective, the researcher utilized Rohner's short form of Parental Acceptance-Rejection Questionnaire (PARQ) and Emotional Expressiveness Scale (EES). The researcher included the whole population of Grade 10. In accordance with the policies of the Institutional Review Board (IRB) of Asia-Pacific Nazarene Theological Seminary (APNTS) and the authority of the target school, the researcher conducted the data collection through Google Meet and treat the collected data with statistical tools such as mean and standard deviation, frequency and percentage, charts/bar charts, and Spearman rho correlation.

Significance of the Study

The research can call the attention to the importance of mothers' responsiveness to child's emotional health. It can also have particular benefits for the following sectors: first, it will be helpful for teachers to understand the emotional development of their students. Second, it will be helpful for guidance counselors to address their students' psychological distress and help them regulate time to minimize online games and cope with their emotions effectively. Third, it will inform pastors and volunteers to look into the emotional health of the children and youth in their congregation. Fourth, it will raise the awareness of social workers of the importance of involving the parents in working with children and youth. Fifth, it can function as relevant research that will help the government to develop and implement policies related to the emotional needs of Filipino youth. Sixth, it will encourage private companies to be more family friendly in terms of work conditions. Seventh, it can contribute to equipping parents to practice responsive, positive acceptance for their sons and daughters' emotional health. Finally, it will prompt child-related workers to focus on the emotional health of the children and youth in their jurisdiction.

Assumptions of the Study

This research is based on the assumptions that adolescents grow up with their primary caregiver, usually with their mothers and under their maternal influence. Hence, this study also assumes that adolescents express their emotions (positive and or negative valence) in different intensities.

Definition of Terms

Emotional Health is the positive expressiveness of several kinds of emotion in socially acceptable ways. In addition, it indicates a high level of positive thoughts toward themselves and their circumstance (Chen, Liu, and Li 2000, 402).

Emotional Expressiveness is “a general disposition toward expressing different emotions across various channels” (Kring, Smith, and Neale 1994, 934). It means how the child usually displays his or her emotion outwardly in certain circumstances.

Grade 10 Students: In the current study, Grade 10 students refer to those who enrolled the Grade 10 level of Cupang National High School in School Year 2021-2022. Moreover, 250 Grade 10 students participated in the current.

Influence: It is to make “behavior change without threat of punishment or promise of reward-results largely from the respect and esteem in which one is held by others” (Lucas and Baxter 2012, 49). In the current study, the researcher used this term to describe either positive or negative parental effects that may change the perception of their sons and daughters on their parental responsiveness and the levels of emotional health.

Maternal Responsiveness is related to Interpersonal Acceptance-Rejection Theory (IPARTheory). Maternal acceptance is the warm, affectionate verbal and nonverbal responsiveness to the child and her rejection is an indifferent, neglecting attitude to the child (Rohner, Khaleque, and Cournoyer 2005b, 305; Khaleque 2015, 1419).

Youth is an adolescent, aged between 12 and 18, that experiences transitional period from childhood and adulthood and physical, socio-emotional, cognitive changes

(Lougheed et al. 2016, 963; Wilson and Wilkinson 2012, 81). The researcher uses the words 'youth' and 'adolescents' interchangeably in the current study.

Scope and Delimitation of the Study

This study is to investigate the emotional health status of Grade 10 students in Cupang, Antipolo City in the Philippines. The researcher has served the target area since 2006 and expects the study to contribute to the development of the intervention programs for the emotional health of adolescents. Considering the social transition of the Filipino family structure and developmental stages of youth, the researcher examined the influence of the perceived maternal responsiveness on the emotional health of Grade 10 students in the target area. Other supports like responsive fathers and extended family that may mediate the youth's emotional health and the mother's parenting styles was not the focus of this study.

Among several kinds of emotion, this study concentrated on the negative emotion expressiveness through a survey to examine to what extent perceived maternal responsiveness had an influence on their children's emotional health.

Because of the pandemic, the researcher conducted the data collection through an online method like Google Meet. Thus, the teachers of the target high school facilitated the surveys as the research assistants. Those who submitted the consent and assent forms among Grade 10 students got the designated link and access it on a certain date to participate in the questionnaires.

Outline of the Dissertation

In the Philippines, mothers are mainly the primary caregivers of adolescents. Their perceived maternal responsiveness (acceptance and rejection) contributes to their children's emotional health. The intervention or training to equip primary caregivers with positive parenting practice will help adolescents achieve harmonious child development. In line with this view, it is necessary to study how local kinds of literature and studies take their position regarding this issue. It may be safe to state that there are no sufficient academic approaches to examine what factors regulate the children's emotional health in the context of the Philippines. Through mentioned questionnaires, this research explored the perceived maternal responsiveness in the target area and studied how this aspect influences the youth's emotional health.

CHAPTER II

REVIEW OF RELATED LITERATURE AND STUDIES

Introduction

In this chapter, the researcher will discuss the changed Filipino family structure and social context transition. This chapter also examines the IPARTheory and attachment theory to understand the parental immediate and lifespan influence on the holistic youth development in various perspectives and to develop the universal characteristics of positive caregivers. The researcher will present the understanding of the youth's emotional health and discuss some factors that regulate the quality of their emotional health.

Historical Background of Structure Changes in Filipino Families

Family is a micro-society of every child and is important for every age of children and youth for their growth (Jaureguizar 2018, 1; Mercado et al. 2019, 1125). The value of family gets a special significant weight in Filipino culture. Filipinos regard the family as the most important social unit and function as the fundamental source of their basic needs and emotional support (Alampay and Jocson 2011, 2-3; Cruz, Laguna, and Mejia-Raymundo 2001, 6-7). Filipinos value "smooth interpersonal relations" in their collective culture based on their culture 'hiya' (shame in English) and 'utang na loob' (a

debt of one's heart in English) (Alampay and Jocson 2011, 2-3; Cruz, Laguna, and Mejia-Raymundo 2001, 8). These cultural values are shown in Filipino traditional childrearing.

Filipino parents demand their children high conformity to follow their socio-cultural norms and values, so they allow their adolescent children to develop the sense of autonomy later than their adolescent children's readiness to exercise autonomy and make decisions for themselves (Alampay and Jocson 2011, 3, 49; 51; Cruz, Laguna, and Mejia-Raymundo 2001, 8; Darling, Cumsille, and Alampay 2005, 49-51). Filipino children avoid confronting their parents based on their value of maintaining "smooth interpersonal relations." They tend to obey their parents and submit to their parents' authority because they feel grateful to their parents for raising and nurturing them. Their gratitude and obedience are associated with their culture of 'utang na loob' toward their parents' sacrificial support (Alampay and Jocson 2011, 58; Cruz, Laguna, and Mejia-Raymundo 2001, 8). However, through social paradigms like urbanization, industrialization, and modernization, the traditional family structure has varied into several forms such as solo-parent family, stepfamilies or blended family, and same-sex families (Medina 2001, 41-43; 272-73; Cruz, Laguna, and Mejia-Raymundo 2001, 1). Solo-parent families, especially female-headed families, increased in numbers between 1970 and 2009 because of several factors like marital separation, migration (increasing Overseas Filipino Workers - OFW), illegitimacy as the consequence of changing sex norms, and adoption (Medina 2001, 284). The female-headed household refers to the household that a female adult person is responsible for providing the needs of the household, especially financial aspects, and making decisions her household (Philippines Statistics Authority 2022; International Labour Organization 2007). The report of the World Bank entitled "Female

Headed Households (% of Households with a Female Head) – Philippines” shows the increasing trend of female-headed households from 14.0% in 1993 to 20.6% in 2017 (The World Bank n.d.).

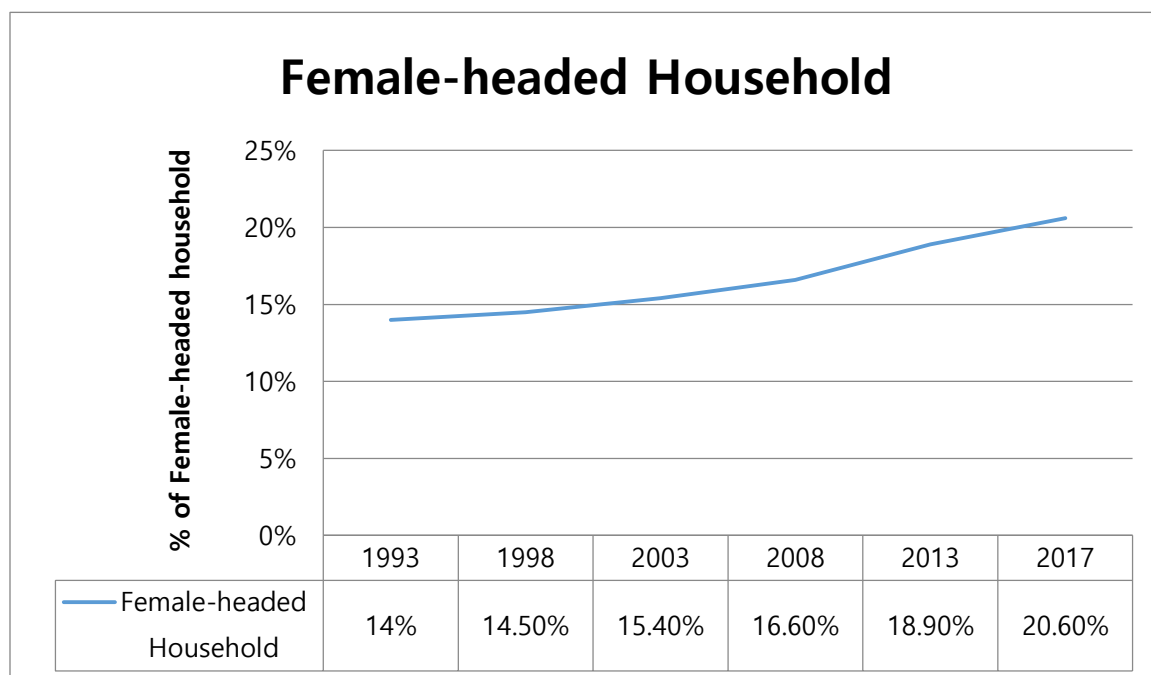


Figure 4: The Increase of Female-Headed Households

In an *Inquirer.Net* article on Single Moms in Double Bind, data of the National Statistics Office reports that more than 37 % of the 1.8 million babies - at least 666,000 babies - were born by unmarried mothers in 2008 in the Philippines (Philippine Daily Inquirer 2015). In 2017, among 1,700,618 registered live births, 907,061 (53.3%) births are born by unmarried mothers (Philippine Statistics Authority 2018). Though the total birth rate decreases with the difference of 99, 382 newborn babies between 2008 and 2017, the number of unmarried mothers’ babies increases with the difference of 241,061 births.

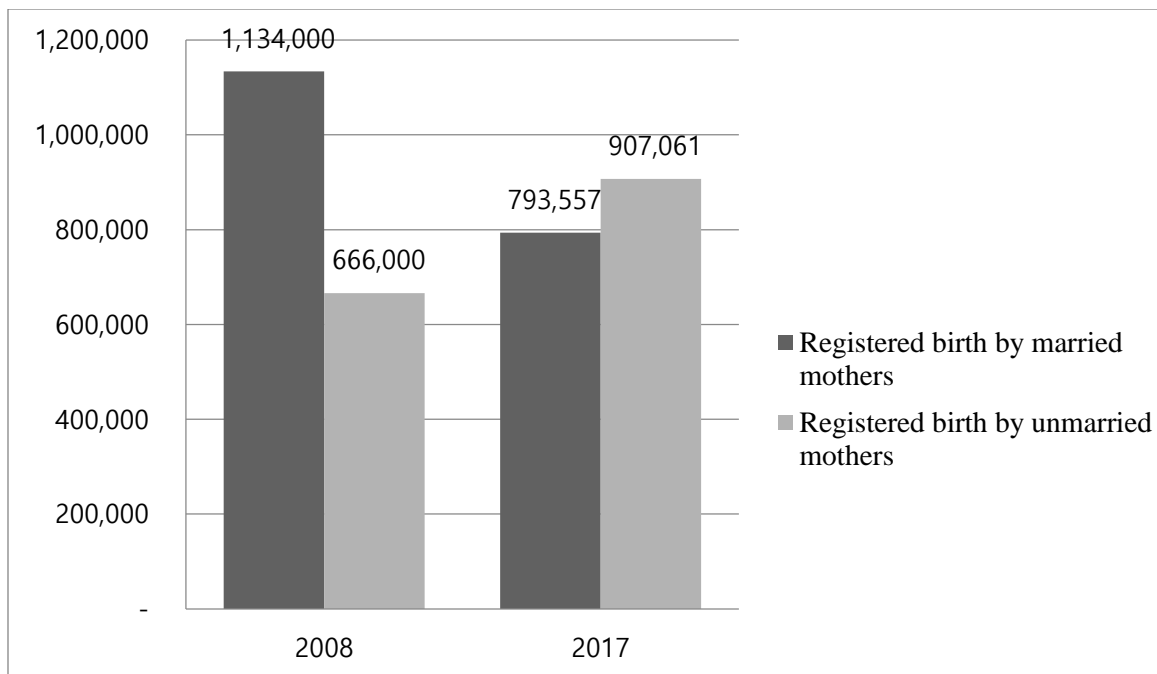


Figure 5: The Increase of Births Born by Unmarried Mother

According to the report “Statistics on Filipino Women and Men's Overseas Employment,” the estimated numbers of OFW in 2012 (2.22 million) has increased to 2.9% more than the previous year, and female OFWs have also increased to 3.9% from 1,032 million in 2011 to 1,072 million in 2012 (Philippine Commission on Women. 2014). These statistics affirm the increase of solo-parent, especially female-head families, in the Philippines.

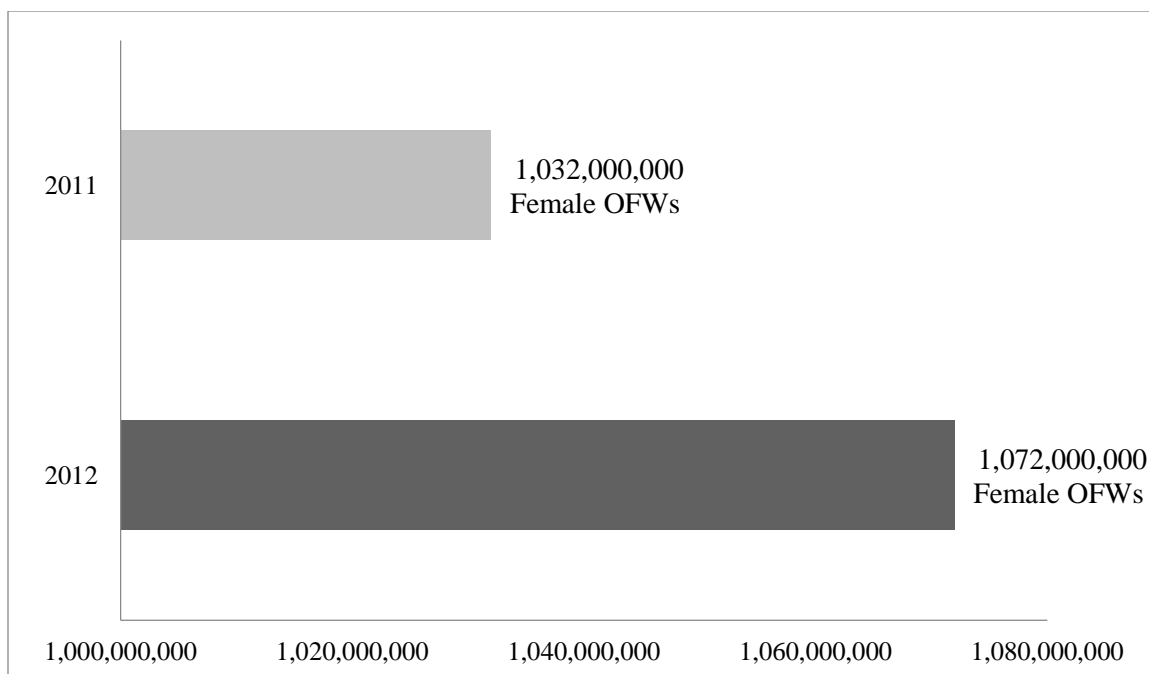


Figure 6: The Increase of Female OFW

An increase in solo-parent families and unmarried mothers' birth rates in the Philippines may predict a negative influence more than a positive one on positive youth development. Securely attached adolescents conduct more prosocial and adaptive emotional outcomes than insecurely attached youth (Rashwan et al. 2017, 63-64; Stefan and Avram 2017, 2316-18). Both paternal and maternal acceptance in their parenting contribute to the emotional adjustment of both sons and daughters and enhance their school performance and prosocial behaviors (Rohner 2016, 11; Rohner and Lansford 2017, 434; Ki et al. 2018, 2443-47; Jaureguizar et al. 2018, 9; Hunter et al. 2011, 437; Putnick et al. 2015, 931). Filipino youth in high parental control and stable relationship of their parents engage fewer risky behaviors than those in low parental control and unstable parents' relationship (Cruz, Laguna, Mejia-Raymundo 2001, 11-12). Considering the Filipino culture valuing the intimate relationship in the family and many studies supporting benefits of both parents for youth emotional and behavioral adjustment, it will

be plausible to predict that increase of solo-parent families will cause Filipino youth to struggle with their developmental challenges.

The Major Paradigm of Parenting-Related Studies

Many scholars discuss parenting with multiple approaches and methodologies with different age groups in other countries. These studies expand the literature concerning positive parenting for holistic child and youth development. Reviewing the related literature, the researcher finds the two major theories that most of their studies are derived from: one is attachment theory and the other is IPARTheory. In the following section, the researcher will present each of them and synthesize them to develop the universal characteristics of positive caregivers that can enhance the youth's emotional health.

Attachment Theory

For child development, young children need to build a secure attachment to their parents, especially to their mothers. Attachment is the system that controls the child's behavior or motivation to seek a sense of security (Bowlby 1982, 371-72; Colmer, Rutherford, and Murphy 2011, 16; Hughes et al. 2005, 379). If a child is attached to a specific figure, usually mother, he or she will demand proximity such as hug, love, and affection from his or her attached figure in the strange circumstance, especially fear/threat-associated-situation (Bowlby 1982, 371; Ainsworth 1985, 772). John Bowlby states that, through their encouraging, affirmative, and actively responding mothers, young children can develop positive outcomes such as a sense of worth, trust in the

helpfulness of other people, and an internal working model for their future relationship (Bowlby 1982, 378).

Children build their working models of the self and of the parents based on their interaction with their parents in early childhood (Bowlby 1988, 129; Egeland and Carlson 2004, 30). The two main features of working models are the individual's notion of "who his attachment figures are, where they may be found, and how they may be expected to respond" and "how acceptable or unacceptable he himself is in the eyes of his attachment figures" (Bowlby 1973, 203). Interacting with the attachment figures, individuals experience how parents react to their physical and emotional needs and establish the working model of the attachment figures and the selves that will regulate their emotion toward the attachment figures and the selves and behavioral tendency. Developed working models influence the feeling toward each parent and about the self, the expectation about parents' reaction, and the plans about how to react to the parents. Thus, internal working models become "habitual, generalized, and largely unconscious, persist in a more or less uncorrected and unchanged state" (Bowlby 1988, 130). Internal working models influence the level of individuals' confidence and competence in interpersonal relationships (Bowlby 1973, 204).

Every child, especially toddlers, needs high quality of attachment relationship through consistent nurture and care to make positive emotional development: they can think logically, develop a conscience, manage stress and frustration, and so on (Hoover 2013, 47-48; Mckelvey 1995, 72-73; Colmer, Rutherford, and Murphy 2011, 17). Attachment with a secure base can develop through the experience of a safe haven (care, protection, and comfort) provided by the secure base (usually mother figure). It

strengthens the child's secure feeling to explore the world (Colmer, Rutherford, and Murphy 2011, 17; Bowlby 1982, 378). In other words, children can change their emotional energy through the emotional support of their parents, which encourages them to explore the world.

Moreover, securely attached children have more affectionate, positive responsive parents while insecure-avoidant children have more neglectful, less affectionate parents (Hughes et al. 2005, 398). It may suggest that the presence of affectionate, positive responsive parents may contribute to nurturing their children to form secured attachment with them. Secure attachment between parents and their children influences their children in positive ways. Secure attachment to mother moderated the possibility of less receptive cooperation with both parents even in the case of the insecure attachment to fathers (Kochanska, Aksan, and Carlson 2005, 655-58). The sensitive responsiveness of mothers can regulate the behavioral tendency of infants and toddlers in positive ways (Ainsworth 1985, 775; 784). Furthermore, parents' positive responsiveness to children's distress is the key to developing the children's positive traits such as emotional security, healthy personality, and autonomy (Bowlby 1988, 136; Bowlby 1973, 322-23). Infants and children form emotional bonds with parents who protect, comfort, and support them and sustain this bonding through adolescence. Though adolescents build new bonds through wider interpersonal relationships, accessible and responsive parents (secure base) are still important to adolescents (Bowlby 1988, 121-22; Bowlby 1982, 204-07).

Thus, parents should be aware of the negative impact on their children's adjustment due to their negative responsiveness to children's distress (Cummings et al.

2013, 226-28). It echoes the theory of Ronald P. Rohner who denotes the consequence of the parental responding attitude (acceptance or rejection).

It is a painful fact that trauma affects brain function and brings about damage, so it is natural for the traumatized individual to act differently from their original behavior and to undergo abnormal thinking processes (Wright 2003, 202-215; Bowlby 1982, 340). Worse is that, as Carole A. Mckelvey stated, unattached children without a supportive family and safe atmosphere would grow up as future sociopaths (Mckelvey 1995, 70). Illogical, trouble-making-action is not disobedience to caregivers, but the natural symptoms of damaged attachment. Nevertheless, being traumatized is not incurable but possible with professional help to understand the trauma and the direction to new normal life (Wright 2003, 216; 231).

Sense of security is the most important theme in the attachment (Noonan 2010, 6). When caregivers provide traumatized children with a safe environment, which can be expressed as unconditional acceptance, non-judgmental attitude, and confidentiality, they will withdraw psychological defenses and enter the healing process (Young 2013, 90-92). Thus, primary caregivers must not only love but must also understand an insecurely attached child.

Parental Responsiveness: Acceptance and Rejection

Ronald P. Rohner developed the Interpersonal Acceptance-Rejection Theory (IPARTheory, formerly known as PARTheory). IPARTheory is “an evidence-based theory of socialization and life span development” that examines the influence of perceived interpersonal relationship experiences of acceptance or rejection, especially parents and child relationships (Rohner 2016, 3; 18-19; Rohner, Khaleque, and

Cournoyer 2005b, 304). In IPARTheory, parental rejection is defined as a harsh, unaffectionate response or emotional unresponsiveness while parental acceptance is a positive response with warm expression and empathy (Rohner, Khaleque, and Cournoyer 2005b, 305; Rohner, Khaleque, and Cournoyer 2005a, 5-7; Hughes et al. 2005, 383). The researcher quotes eight basic postulates of IPARTheory that Rohner identifies:

- Over the course of shared biocultural evolution, humans everywhere have developed the enduring, biologically-based emotional need for positive response (acceptance) from the people most important to them.
- Children and adults everywhere—regardless of differences in culture, gender, race, and other such defining characteristics—understand themselves to be cared-about (accepted) or not cared-about (rejected) in the same four ways.
- Children and adults everywhere tend to respond in the same seven to 10 (or more) ways when they experience themselves to be rejected by parents in childhood and by other attachment figures throughout life.
- The psychological effects of parental acceptance-rejection in childhood tend to extend into adulthood and old age, though often in a less intense form than in childhood.
- Children’s perceptions of fathers’ love-related (accepting- rejecting) behaviors, and adults’ remembrances of these behaviors from childhood often have as great or greater impact on children’s emotional, social, behavioral, and cognitive development than do children’s or adults’ perceptions/remembrances of mothers’ love-related behaviors.
- Some children and adults are better able than others to deal emotionally with the effects of interpersonal (especially parental) rejection. These people are called affective copers in the theory.
- Specific psychological, familial, community, and sociocultural factors tend to be associated worldwide with specific variations in the tendency of parents to be accepting or rejecting.
- The experience of parental acceptance-rejection in childhood tends to reliably predict expressive behaviors and beliefs of adults within a society (e.g., religious beliefs, artistic preferences and traditions, styles of humor, and other expressive behaviors) (Rohner 2021, 37-39).

As Rohner states that “parental love is the single most important factor in a child’s life” (Rohner 2021, 3), his theory generally emphasizes the cross-cultural significant role of the parental responsiveness in the childhood and lifespan influence on individuals’ psychological adjustment in their society. Humans need a positive response

like emotional wish or desire for their comfort and emotional support of their significant others, so any interpersonal rejection experiences, including parental rejection in childhood and perceived rejection of peers and intimate partners in adolescence and adulthood, can negatively affect specific parts of the brain such as precuneus, dorsal anterior cingulate cortex, dorsomedial prefrontal cortex, ventromedial prefrontal cortex, subgenual anterior cingulate cortex, and amygdala (Rohner 2021, 8-16). Cross-culturally, the rejection causes internalizing problems (depression, depressed affect, social withdrawal, and somatic symptoms), various externalizing problems (delinquency, aggressive and impulsive behaviors, and temper outbursts), and other issues related to mental health (drug abuse, interpersonal maladjustment, rejection sensitivity, etc.) (Rohner 2021, 32-34). The basic eight (8) postulates are developed into three sub-theories: “IPARTheory’s personality subtheory,” “IPARTheory’s coping theory,” and “IPARTheory’s sociocultural systems model and subtheory” (Rohner 2016, 7-17).

IPARTheory’s Personality Subtheory

The personality subtheory is the most well-developed one in IPARTheory. It is “to predict and explain major personality or psychological- especially mental health-related- consequences of perceived interpersonal acceptance and rejection” (Rohner 2016, 7). Personality in the theory refers to “an individual’s more or less stable set of predispositions to respond” and “actual modes of responding” in several contexts (Rohner, Khaleque, and Cournoyer 2005b, 310). Parents are defined as “any person who has a more-or-less long-term primary caregiving responsibility for a child” (e.g., biological or stepparents, older siblings, grandparents, relatives, and non-parent adults) (Rohner, Khaleque, and Cournoyer 2005b, 301). It postulates that parents are significant

figures to their children because their positive and responsive parental acceptance is associated with their children's positive emotional and behavioral outcomes while the parental rejection causes them to increase their anxiety and insecure emotion (Rohner, Khaleque, and Cournoyer 2005b, 309-11; Rohner 2016, 7-8).

Dependence in IPARTheory is seeking frequent positive responses and using many bids for responses. In contrast, independence is the stable emotional state through enough positive interaction and satisfying emotional needs with the attached significant figures (Rohner, Khaleque, and Cournoyer 2005b, 311; Rohner 2016, 10; Rohner and Lansford 2017, 428-29). Defensive independence results from significant others' rejection. Defensive independent people do not show their desire for a positive response like immature dependent individuals. However, unlike healthily independent people, they seek positive responses inwardly, not outwardly (Rohner 2016, 10; Carrasco, González-Calderón, and Suárez 2018, 661-62).

According to the IPARTheory's personality subtheory, perceived aggressive and hostile rejection of significant others makes children and adults develop immature dependent and defensive independent personalities while positive and supportive acceptance contributes to having independent personality (Rohner 2016 10). The problem is the consequences of these personalities because of the relationship between personality types (immature dependence, defensive independence, and healthy independence) and responsiveness (acceptance and rejection) (Rohner, Khaleque, and Cournoyer 2005b, 310; Carrasco, González-Calderón, and Suárez 2018, 661-62). Aggressive and hostile parental rejection influences to shape children's dependent and defensive independent personalities and is associated with negative personality tendencies such as anger,

aggression, negative self-adequacy, emotional unresponsiveness, distorted self-esteem, emotional instability, and negative worldview (Rohner, Khaleque, and Cournoyer 2005b, 311-12; Rohner 2016, 10-11; Giaouzi and Giovazolias 2015, 3170; Khaleque 2017, 978; 985; Khaleque 2014, 1426-27; Rohner and Lansford 2017, 429).

IPARTheory's Coping Theory

Rejected children show more psychological problems and worse psychological adjustment than accepted children (Ki et al. 2018, 2447). IPARTheory calls them “troubled” to adjust psychologically while “affective copers” in the theory are those who can “thrive emotionally” and adjust psychologically regardless of rejecting experience in their childhood (Rohner 2016, 12-13; Rohner, Khaleque, and Cournoyer 2005b, 314; Ki et al. 2018, 2442). The coping theory studies “the question of how some rejected individuals are able to withstand the corrosive drizzle of day-to-day rejection without suffering the negative mental health consequences that most rejected individuals do” (Rohner 2016, 13). Rejection may cause individuals to be non-copers. However, there are copers who effectively manage their rejected experiences with their coping skills, resilience, and mediating factors (accepting interpersonal relationships with peers, non-parent adults, and intimate partners) to develop their well-being and minimize the negative consequence of rejection (Rohner 2021, 19). Based on the concept of coping and resilience, the coping subtheory suggests copers can diminish and overcome the negative influence and pains of their perceived parental rejection in childhood with their coping skills such as “the ability to depersonalize” (being positively insensitive to hurtful interpersonal encounters), “a sense of self-determination” and “a clearly differentiated sense of self” (distinguishing their parents’ emotion toward them from their feelings

about themselves) (Rohner, Khaleque, and Cournoyer 2005b, 315-16; Ki et al. 2018, 2452; Rohner 2021, 19). It emphasizes the positive function of rejection insensitivity to strengthen their positivity and resilience. There are two types of copers: one is affective copers and the other is instrumental copers. Their difference is the condition of emotional and mental health. Affective copers are those who have good emotional and mental health even in rejection family climate and instrumental copers are individuals who demonstrate high achievements at school and work but have impaired emotional mental health (Rohner 2016, 14-15; Rohner, Khaleque, and Cournoyer 2005b, 316; Rohner and Lansford 2017, 431).

According to IPARTheory's coping subtheory, regardless of the intensive influence of parental responsiveness, IPARTheory suggests the resilient factors that can positively enhance non-copers' psychological adjustment through the new attachment with God and through another life experience with significant partners in their adulthood (Limanta 2019, 124; Ki et al. 2018, 2452).

IPARTheory's Sociocultural Systems Model and Subtheory

IPARTheory's sociocultural systems model and subtheory identifies that parents practice their parenting in accordance with "the maintenance systems of that society- including such social institutions as family structure, household organization, economic organization, political organization, a system of defense, and other institutions that bear directly on the survival of a culturally organized population within its natural environment (Rohner 2016, 16-17; Rohner 2021, 21-22). The theory explains that parental responsiveness can be interpreted differently, but the influence of interpersonal acceptance-rejection experience in the society on individuals are generally associated

with psychological adjustment and behavior issues (Rohner 2021, 33-34; Rohner 2016, 16-17; Rohner, Khaleque, and Cournoyer 2005b, 308-09). Perceived acceptance and rejection are important information to study the parental responsive styles in diverse cultures as parents and their children interpret parents' actions differently according to their culture and social system (Rohner and Lansford 2017, 431; Rohner, Khaleque, and Cournoyer 2005b, 308-09; Lansford et al. 2010, 2; 11).

Uniquely, youth may feel parental rejection from time to time even in happy and healthy families demonstrating parental acceptance as they subjectively perceive and interpret their interaction with their parents (Jager et al. 2016, 2109-11; Limanta 2019, 10, 25; Rohner, Khaleque, and Cournoyer 2005b, 308). Consequently, their perceived rejection experiences cause them to have internalizing and externalizing behaviors (Jager et al. 2016, 2117-19). Filipino children and adolescents ages from eight to 11 without mental health conditions experience psychological maladjustment when they perceive the rejection of their parents (Diaz 2020). Thus, measuring perceived parental responsiveness (either acceptance or rejection) will be appropriate in youth-related studies to examine how adolescents feel about their parents' emotions toward them and help to predict their emotional state and adjustment level.

Kochanska, Aksan, and Carlson found that in mother-child dyads, maternal responsiveness in infancy and child security at 15 months are highly related to the level of the child's receptive cooperation with the mother, especially anger-prone-child (Kochanska, Aksan, and Carlson 2005, 655). Furthermore, there was related literature regarding the resilience of "difficult temperament children." When difficult temperament children experienced the "high mothers' responsiveness," they showed "the increase of

committed compliance and the decrease of externalizing behavior problems” (Kochanska and Kim 2013, 324; 327-30). While high parental responsiveness not only moderated the negative outcomes of difficult temperamental children remarkably but also enhanced the level of committed compliance, the combination of children’s difficult temperament and “parent’s unresponsiveness” resulted in more negative outcomes like more externalizing behavior problems and less committed compliance (Kochanska and Kim 2013, 327-30).

Parental responsiveness is important to children’s emotions and behaviors and maintains its main role to ensure youth emotional health throughout adolescence and adult life (Gardner and Zimmer-Gembeck 2018, 2; Giaouzi and Giovazolias 2015, 3176; Rohner 2016, 11; Rohner, Khaleque, and Cournoyer 2005b, 313; Limanta 2019, 26). When parents practice acceptance and discipline youth with a logical explanation, youth demonstrate psychological adjustment, lower rejection sensitivity, and less level of social anxiety, (Frances 2006, 96; Gardner and Zimmer-Gembeck 2018, 2; Giaouzi and Giovazolias 2015, 3177; 1426-27; Khaleque and Ali 2017, 450). Parental rejection causes a cold relationship with their parents in adulthood, negative influence on God’s image, emotion regulation (Giaouzi and Giovazolias 2015, 3177; Limanta 2019, 123-4; Rohner and Lansford 2017, 433-34).

The research regarding the relationship between parents’ depression and adolescent adjustment was conducted with 320 children (235 kindergarten children - 100 boys and 129 girls/ 85 children from grade one, two and 75 boys and 35 girls) in the United States (Cummings et al. 2013, 216-17). Among 320 children, 81.5% of participants engaged again in the research at the adolescent ages in this four-wave longitudinal research (Cummings et al. 2013, 217). This study reveals that the mother’s

depressive symptoms were related to adolescent peer problems and to “children’s internal representations of not only mother-child but also father-child attachment” (Cummings et al. 2013, 227). Their findings supported the importance of maternal mental health for the sake of harmonious child development as well as the related influence of maternal warm, positive, consistent responsiveness on the adolescent adjustment.

Syntheses of IPARTheory and Attachment Theory

Many scholars affirmed that warm, positive, consistent maternal responsiveness plays a significant role in child development (Kochanska, Aksan, and Carlson 2005; Hughes et al. 2005; Cummings et al. 2013; Kochanska and Kim 2013). Parental acceptance and rejection influence child behavioral outcomes. For example, children, who experienced rejection and failed to receive a positive consistent response from attachment figures, tend to display negative behavioral dispositions like “hostility, aggression, immature emotional regulation, anxiety, and insecurity” (Hughes et al. 2005, 382-83).

IPARTheory echoes Bowlby’s attachment theory. For example, there was one study concerning “The Linkage between Parental Behavior and Child Attachment” through analyzing the similarity or dissimilarity between “Parental Acceptance-Rejection Theory (PARTheory) and Attachment Theory” (Hughes et al. 2005, 388). In the attachment theory, every individual establishes his or her working models of the world and him or herself (Bowlby 1973, 203). It is called the *internal working model*. Children build their internal working models based on their attachment experiences with their attachment figures in early childhood (Li 2016, 27). Children examine relationships or interpret the situation based on their early experiences (Hughes et al. 2005, 384). Thus,

the loved children develop more confidence in their parents' love and in other interpersonal relationships than the unwanted children do (Bowlby 1973, 204-05). The securely-attached infant has a consistent, prompt responsive, and available working model of his or her mother (Ainsworth 1985, 777-78; Li 2016, 24). In other words, the security and insecurity of attachment relatively depend on the stability and responsiveness, and consistent accessibility. It is similar to *mental representations* in IPARTheory, which refers to "an individual's implicit conception of existence, including the conception of things that individuals take for granted about themselves and others" (Rohner, Khaleque, and Cournoyer 2005b, 313). They establish the perception of people about the experienced situations and influence the tendency of their reactions, so the rejected experience can form a negative mental image concerning the interpersonal relationship and later affect the relational social skills (Rohner 2016, 11; Rohner, Khaleque, and Cournoyer 2005b, 313; Hughes et al. 2005, 384). The established mental representation of the self, significant others, and the world influence individuals' perception, interpretation, and reactions to new experiences in interpersonal relationships (Rohner 2016, 11; Rohner and Lansford 2017, 429).

Table 1: Summary of Similarity and Difference between Attachment Theory and IPARTheory (Hughes et al. 2005, 384-87)

	Attachment	IPARTheory
	Sensitivity	Positive response/ acceptance
	Insensitivity	Rejection
Similarity	Internal working models: Conscious and/or unconscious rules to form the information about oneself, the other, and their relationship	Mental representation: beliefs and expectations regarding oneself, important others, or other interpersonal relationship
	Focus on infants and toddler	School-aged children, adolescents, and adults
	Focus on the form of their attachment behaviors toward mother	Quality of parental acceptance-rejection
Difference	Laboratory research (strange situation) and behavior observation	Questionnaire and research
	Category: types of outcomes (Secure vs Insecure attachment)	Category: dimensions (degrees of dependence, emotional stability, hostility, or self-esteem)

Attachment Theory (Bowlby and Ainsworth) highlights the secured attachment with the child's mother. The issue of secure/insecure attachment is essential for the child's development. IPARTheory (Rohner) emphasizes the importance of the parental positive response and acceptance. In common, both theories advocate the needs of responsive, warm parents to raise and nurture a holistically healthy child. However, the researcher chose IPARTheory because this study concentrated on the influence of perceived maternal responsiveness on the youth's emotional health. IPARTheory is studying interpersonal relationships from children to adults though its major concern is derived from the parental responsiveness (acceptance or rejection) and its influence on children's psychological adjustment (Rohner 2008, 8-9; Rohner, Khaleque, and

Cournoyer 2005b, 304-09; Khaleque and Ali 2017, 451-54). Its instruments were translated into 40 languages and conducted in approximately 500 researches in around 60 nations cross-culturally (Khaleque 2014, 1424). Abdul Khaleque analyzed 35 studies in 16 countries with 13,406 children (52% boys and 48% girls, age range between 12 years and 18 years) and affirmed the instrument Child Parental Acceptance-Rejection Questionnaire is robust and has no significant heterogeneity (Khaleque 2017, 983; Khaleque and Ali 2017, 443-44; Khaleque 2014, 1426). Considering these aspects, the researcher used IPARTheory and PARQ in the current study.

There are some different points between attachment and parental responsiveness. However, each of them reveals the characteristics of positive caregivers, as shown in Figure 7. Children who interact with affectionate, encouraging, supportive, cooperative, positively responsive attached figures demonstrate a healthy self-concept and the prosocial strategy to form trusting interpersonal relationships (Bowlby 1982, 378; Bowlby 1988, 131-36; Colmer, Rutherford, and Murphy 2011, 17-19). Furthermore, these positive caregivers influence establishing the sense of children's competence and their willingness to explore the world (Bowlby 1982, 378; Bowlby 1988, 124).

Parental accepting responsiveness such as warmth, praise, support, reasoning approach, and comfort tend to produce positive child characteristics (cooperativeness, effective coping, low levels of behavior problems, and high level of moral reasoning). However, rejecting parental responsiveness like shouting and corporal punishment causes children to form negative child characteristics (aggression, noncompliance, blaming others about the negative outcome) (DeHart, Sroufe, and Cooper 2004, 428).

If parents interact with their children with warm, empathic, reciprocal, reasoning responsiveness and reasoned control like setting firm boundaries in discipline, children have several advantages like prosocial skills, creativity, healthy self-concept, positive behavioral regulation regardless of their socioeconomic status (Kochanska and Kim 2013, 327-30; Horning and Gordon Rouse 2002, 155-56; Greenspan 1999, 1-4). In summary, positive caregivers are those who perform warm, affectionate, reciprocal responsiveness. They tend to approach children with supportive, encouraging, empathic attitudes under the mutually-reasoned-firm boundary.

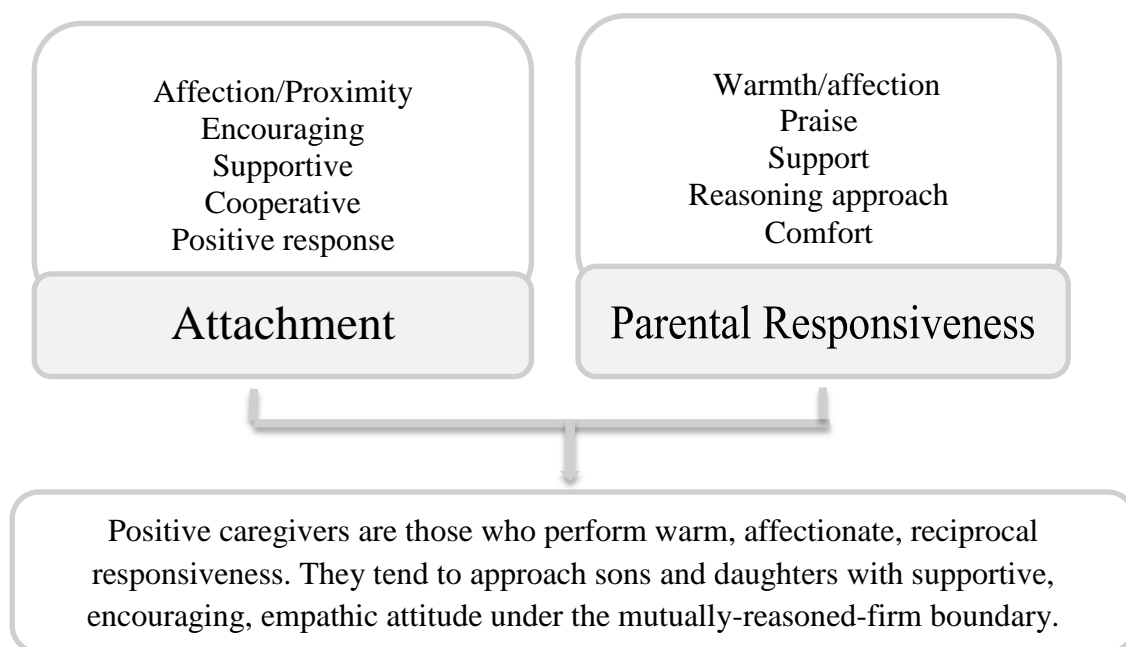


Figure 7: Summary of Characteristics of Positive Caregivers (Bowlby 1982, 378; Bowlby 1988, 136; Rohner, Khaleque, Cournoyer 2005, 5-7)

Both Attachment Theory and the IPARTheory commonly emphasize the importance of parental roles because of the influence of the caregivers (primarily parents) on the child's behavioral, moral, and emotional development. This observation develops the need for balance between support and control in parenting practices that Social Bond Theory (SBT) also supports. SBT consists of four basic elements: attachment to

conventional others (parents or siblings), commitment to conformity (for the goals and dreams), involvement in conventional activities, and a belief in the legitimacy of the law (social values and norms). According to SBT, the balance between support and control is helpful to develop the positive parent-son/daughter relationship and decrease the engagement with problematic behaviors. For example, the more attached teenagers are to their parents, the more they spend time with their parents. Moreover, the closer the relationship the children have with their parents, the lower the possibility of delinquent behaviors occurs because of indirect supervision (parental awareness of their activity) and intimate communication (Kierkus and Baer 2002, 430-31; Aliiaskarov and Bakiev 2014, 206).

Holistic Child Development

There seems to be no perfect place to raise the child for the sake of holistic child development. However, every social unit – from the child’s parents, his or her family, his or her community (including the church), to his or her country- will require the balance in the nurture and the cooperation among the social units so that every child can grow up as a mature citizen in his or her society. It should also nurture the child to become resilient in facing his or her challenges in life. In line with the importance of balance in nurture, it will be helpful for parents and other social units to understand the youth developmental task in order to respond positively to the adolescent and seek their holistic development, especially in their emotional well-being (Criss et al. 2016, 526-27; Sanders et al. 2015, 410-12; Velasco 2011, 3-4, 9-17, 25-27; Eisenberg, Cumberland, Spinrad 1998, 31-36).

Erna Roostin explains that “the development of children is a pattern of change that begins from the conception and continues throughout the life cycle. Child

development patterns are complex because they involve biological, cognitive and socioemotional processes” (Roostin 2018, 5). It views the child’s growth as a complex and continual process of diverse developmental tasks. The Bible includes the stories related to child development. Jesus grew “in wisdom (psychological), in stature (physical), in favor with God (spiritual), and with human (social)” (Lk 2:40, 52; Athriba 2016, 45). His growth report was a positive example of the holistic (physical, social, mental or cognitive, emotional, moral, and spiritual) child development. Also, it affirms the complexity of a child’s growth and the holistic perspective of child development. Jesus grew up holistically and fulfilled his mission as the Savior of the universe (John 14:6). His life testifies the positive consequence of the integrated child development to blossom in the best potential uniquely given to each child.

A Child as a Whole Person in Multiple Contexts

The Bible depicted the child from multi-dimensional views. The child in the Bible is God’s gift, the blessing of each family, and a source of joy (Ps. 127:3-5). The child is also a sinful creature like adults, but innocent and pure in loving God and his or her neighbors (Matt. 20:12-15; 2 Kgs. 5:2-4). The child grows under parental instruction and guidance (Pro. 4:1; 6:20-21). However, we cannot undermine the fact that the child is also fully human with dignity embedded in the image of God (Gen. 1:27). The child’s maturity will be developed in the course of his or her growth (Pro. 7:1-5). However, despite the immaturity at an early age, the child has the competence and potential of influencing the adults and community as a model of faith and can be an agent that reveals God’s will (1 Sam. 17:12-51; Matt. 18:1-5). It means the child fulfills his or her role as an influencer as well as influence-recipient in both micro and macro social systems.

Nevertheless, the child is still vulnerable to social injustice and dangerous environments like wars and famine (Exo. 1:8-22; Isa. 10:2; Matt. 2:13-18).

In relation to this Biblical understanding of the image of the children in the Bible, Kathryn Copsey views a child as a whole person born and growing in multiple contexts (Copsey 2003, 3-4). Marcia J. Bunge also describes the multi-dimensional and complex notions of the children. According to Bunge, children are spiritual beings with the embedded image of God, but they are more vulnerable physically, emotionally, and socially than adults. Children possess both strengths (creativity, resilience, potential, and openness) and weaknesses (immature attitudes or behaviors and sinful nature). Thus, children need the nurture of their family and a safe community (Bunge 2006, 563-68). To empower the child to grow his or her God-given potential, he or she needs safe environments that he or she can flourish fully in every aspect. These diverse perspectives indicate the complexity of the definition of the child as a whole person. The multi-dimensional perspectives of the child acknowledge the child's wholeness and the importance of holistic child development.

Child Developmental Theories

Child's holistic development includes the physical (body size, motor skills, brain development, and physical health), socio-emotional (relationships with others, attachment, and emotional well-being), cognitive (capacity to think, to communicate, and to solve the problems), and spiritual (knowing God and restoring relationship with God) development (Greener 2002, 2-3; Copsey 2003, 4-10).

The developmental theories also broaden their extent of studying the child. The dominant image of the child as "passive recipients of life events" in the early twentieth

century was continually challenged by the knowledge of the cognitive, emotional, and physical child development (Greener 2003, 40).

Socio-emotional Development

By the 1930s and 1940s, many parents turned to the psychoanalytic perspective for help with their children's emotional stress and behavioral problems (Berk 1996, 15).

Psychosexual development (Sigmund Freud)

Freud explains the relationship between the child's biological instincts and his or her development and emphasizes that the parental responses to the child's instincts can influence the formation of the child's personality in the course of developing stages (Balswick, King, and Reimer 2016, 77-78). The theory has five stages: "oral stage, anal stage, phallic stage, latency, and genital stage" (Freud 1963, 45-59; Garcia 1995, 498-99). First, in the oral stage, the infants do "thumb-sucking" (also called "sensual sucking") at their mothers' breast or substitutes and their lips function as their "erotogenic zone" (Freud 1963, 45-47). Freud states that the erotogenic zone is the attached part of the body where individuals attain the feeling of satisfaction by repeatedly and habitually stimulating it (Freud 1963, 47-50). Second, during the anal stage, children (mid-infancy to four-year-old) will experience a sensation of pleasure after releasing their fecal masses by controlling their anal zone (Freud 1962, 46-47; Freud 1963, 55). The oral and anal stages are categorized as the pregenital phases (Freud 1962, 57-58). Third, it is the phallic stage after the pregenital phases. Acknowledging only male genital differentiates this stage from the genital stage and children give up seeking "more mature object relationships" (Freud 1953, 1517; Freud 1961, 165; Garcia 1995, 499). Fourth, before adolescence, children are in the stage of latency when the "sexual inhibitions" occur to

control sexual impulses in culturally and socially acceptable ways (Freud 1963, 43-44). Fifth, the genital stage is the final part to form an adult-like sexual aim toward an “extraneous sexual object” (Freud 1963, 53, 63). This stage starts with puberty (Freud 1963, 55).

Since Freud’s theory focuses on the psychosexual development of children suggesting that at each life stage, children have instinctive sexual drives. Hence, parents need to pay attention and respond appropriately to these manifestations in order to allow them release these energies positively.

Psychosocial development (Erik Erikson)

Erik Erikson is the theorist of the Psychosocial Development Theory. The theory describes the child as a “seeker” who achieves or fails in his or her developmental tasks in relationship with various significant people by different ages: birth to one year (trust vs mistrust; relationships with mother), one to three years (autonomy vs shame/doubt; with parents), three to six years (initiative vs guilt; with family), six to 12 years (industry vs inferiority; with the neighborhood, teacher, and school), 12 to 17 years (identity vs role confusion; with peer groups and heroes), young adulthood (intimacy vs isolation; with opposite sex and friends), adulthood (generativity vs stagnation; with spouse and children), and old age (ego integrity vs despair; with others) (Erikson 1985, 247-69; Richards 1983, 93-94).

First, the mother is the significant figure to the infants (birth to one-year-old). Infants either build trust or mistrust depending on the quality of the maternal sensitive, responsive care. Second, parents are the significant figures to toddlers between one to three years old. Toddlers who achieve “a sense of self-control without loss of self-esteem”

develop autonomy while those who lose “a sense of self-control and experience foreign overcontrol” feel shame and doubt (Erikson 1985, 254). Third, the relationship between family and preschoolers at age three to six is important to determine whether they will develop either initiative or guilt. Experiences that preschoolers actively plan and fulfill their tasks allow the preschoolers to develop a sense of initiative. However, the deprivation of initiative experienced by oppression and control results in an “energetic halt” and the sense of guilt that makes the preschooler avoid exploring their newly developed competent skills and actions (Erikson 1985, 255-56). Fourth, the extended interpersonal relationships with neighborhood, teacher, and school are the important factors to achieve the fourth developmental task of the industry for children ages six to 12. Children utilize their tools and skills to complete their tasks. Successful accomplishment with their initiative leads children to develop a sense of industry while discouraging experiences result in a sense of inferiority (Erikson 1985, 259). Fifth, the peer groups and heroes are significant figures to adolescents aged 12 to 17. The youth think about who they really are and how others perceive them. Wrestling with those thoughts and integrating them, the youth discover their genuine identity or “ego identity.” Erikson defined ego-identity as “the accrued confidence that the inner sameness and continuity prepared in the past are matched by the sameness and continuity of one’s meaning for others” (Erikson 1985, 261). However, an ambiguous understanding of the ego identity may cause youth to feel role confusion. Sixth, during young adulthood, people of opposite sex and friends are important figures. According to Erikson, intimacy refers to “the capacity to commit himself to concrete affiliations and partnerships and to develop the ethical strength to abide by such commitments” (Erikson 1985, 263).

Successful identity formation leads young people to develop intimacy in interpersonal relationships, especially with their opposite-sex partners. However, young adults with insecure ego-identity tend to resort to isolation and find it difficult to develop intimate relationships with others. Seventh, spouses and children are important to individuals in middle adulthood to accomplish their developmental tasks. Generativity means “the concern in establishing and guiding the next generation” (Erikson 1985, 267). Feeling helpful and productive to the younger generation and caring for them help adults in this stage to achieve generativity. However, lacking the sense of helpfulness and productivity leads adults to stagnation. Eighth, individuals at old age will achieve “ego integrity” through their “ego’s accrued assurance of its proclivity for order and meaning” (Erikson 1985, 268). The ego integrity helps individuals to perceive their lives as valuable and meaningful and form “the patrimony” of their souls (Erikson 1985, 268). The absence of ego integrity develops a fear of death and despair about their short life (Erikson 1985, 247-69; Richards 1983, 93-94).

Table 2: Erikson’s Psychosocial Development (Erikson 1985, 274).

Age	Prosocial Developmental Tasks	Basic Virtues to Achieve
Infant (birth to one year)	Basic Trust vs. Basic Mistrust	Drive and Hope
Toddler (one to three years)	Autonomy vs. Shame and Doubt	Self-control and Will power
Preschoolers (three to six years)	Initiative vs. Guilt	Direction and Purpose
Childhood (Six to twelve years)	Industry vs. Inferiority	Method and Competence
Puberty and Adolescence (twelve to seventeen years)	Identity vs. Role Confusion	Devotion and Fidelity
Young Adulthood	Intimacy vs. Isolation	Affiliation and Love
Adulthood	Generativity vs. Stagnation	Production and Care
Old Age	Ego Integrity vs. Despair	Renunciation and Wisdom

Psychoanalytic theory pays attention to the physical instincts and advocates the importance of the parental immediate, correct responses to the child’s physical instincts for the positive personality. While Freudian theory tends to focus on early childhood, Erikson has an overview of life-long-span development and analyzes the different developmental tasks from the relational perspectives. Expanding social interactions from a mother to others is helpful to understand the growing child in contexts.

Object relations theory (Donald Winnicott)

It highlights the relationship between the child and a “good enough mother” (Balswick, King, and Reimer 2016, 82). It affirms the positive role of a good enough mother in the child's personality formation. However, it has some limitations to explain other parts of holistic child development.

Cognitive Development

Operant learning theory (B. F. Skinner)

According to this theory, the child modifies his or her behavior by experiencing positive or negative reinforcement (rewards and punishment respectively) and by observing the consequence of others' behavior (Skinner 1984, 219). Like the video clip "Children see. Children do," this theory advocates the significance of modeling for the sake of child development (Child-Friendly Australia 2006). Thus, parents' modeling is important to develop positive learning and behaviors through reinforcement and observation (Skinner 1984, 221; Balswick, King, and Reimer 2016, 86-87). However, from the Biblical understanding of human's sinful nature and free will, the child needs to be trained in wisdom, virtue, and self-control through parental discipline and modeling, not merely reinforcement (Morgan 1996, 88). Thus, the disciplinary aspect is missed from the behavioristic learning theory though it takes an essential position in parenting styles for the child's spiritual and moral development.

Social cognitive learning theory (Albert Bandura)

People in this theory are "agentic operators in their life course" and "sentient agents" (Bandura 1999, 155). "Triadic reciprocal causation" describes the interplaying relationship among personal factors (cognitive-affective and biological events), behaviors, and environmental factors (Bandura 1999, 156; Nabavi 2012, 14-15). Bandura states that individuals learn something by "experiencing the effects of their actions and through the power of social modeling" and values the cognitive capacity (Bandura 1999, 170). In the theory, learning occurs by observing modeled behaviors and its consequence (either reward or punishment), anticipating the outcomes (forethought), and deciding their

direction by self-regulation (Bandura 1999, 173-75). Self-efficacy- “people’s beliefs in their capabilities to perform in ways that give them some control over events that affect their lives” – is the significant factor in the self-regulation to develop problem-solving strategies and increase active social participation (Bandura 1999, 181-82).

Symbolic interaction theory (George Herbert Mead)

According to this theory, social symbolic interactions (language, gesture, play, and game) with caregivers and others in his or her social group shape the child’s self-concept and become a human from the social perspective (Balswick, King, and Reimer 2016, 89-91). It affirms the on-going-growth of the child. However, it is inconsistent with the Biblical understanding of the child’s dignity as a fully human with dignity embedded in the image of God (Gen. 1:27).

Cognitive development theory (Jean Piaget)

This theory views the child as an “independent explorer” (Balswick, King, and Reimer 2016, 97). According to this theory, the child goes through four stages in the development of their thinking: the first stage is a sensori-motor stage (birth to age two); the second is a pre-operational stage (ages two to seven); the third is a concrete-operational stage (ages eight to eleven); and the fourth is a formal operational stage (age 11 above) (Piaget 1929, 39-60; Copsey 2003, 6-7; Richards 1983, 100). This theory respects the uniqueness and difference of each child and trusts that the child develops the ability to reason logically. Thus, Jean Piaget's research encourages educating according to the child’s cognitive stages (Copsey 2003, 6-7). It means that the varied readiness and ability of the individual child is more valued than the generalized standard of academic competency.

Socio-Cultural Theory (Lev Vygotsky)

Lev Vygotsky states that “what a child can do with assistance today she will be able to do by herself tomorrow” (Vygotsky 1978, 87). It means that children collaborate to master their immature parts with adult guidance in the present and then will do it independently in the future. Vygotsky calls this mature period ‘the zone of proximal development’ (Vygotsky 1978, 86). This theory applies the notion of scaffolding the child’s development. In this theory, the child is described as a collaborator and enhances their ability more than their biological competence through the scaffolds in learning (Balswick, King, and Reimer 2016, 96-97). It stresses the child should interact and learn in his or her social contexts to learn socially acceptable actions as a citizen in his or her community (Vygotsky 1978, 88, 131-32; Greener 2003, 41). It is applicable to parenting. Parents as spiritual education teachers lay the scaffolds (faith practices like praying, reading the Bible, acting the faith out in the reality in this context) so that the child can step on them for the safety of his or her ongoing transformation and understanding abstract meaning in the Bible and their lives.

Faith Development

Faith development theory (James Fowler)

James Fowler defined faith as “a trust in and loyalty” to something that the individual values the most (e.g. family, success, or one’s career), to something powerful that can ensure our safety, to “a shared master story or core story,” and to other people (Fowler 1991a, 22-23). The theory explains how each individual develops faith in different stages of life as follows: Primal faith, intuitive-projective faith, mythic-literal

faith, synthetic-conventional faith, individuative-reflective faith, conjunctive faith, and universalizing faith (Fowler 1991a, 24-25; Fowler 1991b, 102-15).

First, during infancy, infants are supposed to form a “prelanguage disposition of trust” at the stage of primal faith, which is also called “undifferentiated faith” (Fowler 1980, 144). Second, intuitive-projective faith happens during early childhood from age three to seven. Children in this stage make long-term images by “the examples, moods, actions, and language of the visible faith of primal adults,” and those images influence their lives as “positive and threatening powers” (Fowler 1980, 144; Fowler 1991a, 24). Third, mythic-literal faith can be shaped by interpreting the literal meaning of stories and beliefs during childhood (elementary-school years and beyond) as children can distinguish reality from fantasy through the development of concrete operational thinking and perceive others’ perspectives. Thus, they can “order the world with categories of causality, space, time, and the number” and interpret what recently happens to them based on their mythic-literal faith in someone or in something significant (Fowler 1991a, 25). Fourth, synthetic-conventional faith is formed during middle adolescence as youth can do formal operational thinking and understand abstract ideas and concepts. These developmental changes help youth reconsider their past experiences to find “meaning and pattern” and think about their future such as their identity and vocation (Fowler 1991b, 107). Also, they understand their “interiority” and that of others through “mutual interpersonal perspective taking” (Fowler 1991b, 107-08). In the course of development, they form their worldview derived from their beliefs and culture and build new interpersonal relationships with significant others, including God (Fowler 1991a, 25; Fowler 1991b 108). Fifth, individuative-reflective faith can be established in young

adulthood. In this stage, individuals form “executive ego” which refers to “the composite of the roles” that individuals take, so one role cannot fully describe who the individuals are (Fowler 1991b, 109-10). Also, individuals will be “explicit commitments rather than tacit commitments”: explicit refers to “consciously chosen and critically supported” while tacit means “unconsidered, unexamined, uncritically approved” (Fowler 1991b, 109). To develop explicit commitments in relationships and vocation, individuals will reflect and examine their already-formed beliefs and values through their critical thinking (Fowler 1991a, 25). Sixth, conjunctive faith is achieved in the mid-life of individuals or beyond by “the embrace and integration of opposites or polarities” in individuals’ lives (Fowler 1991b, 111). Individuals can appreciate the existing symbols and stories in new perspectives and discover a “hunger for a deeper relationship to the reality that symbols mediate” (Fowler 1991a, 25; Fowler 1991b, 111). Seventh, universalizing faith is based on “the oneness with the power of being or God,” so individuals in this stage seek to overcome “division, oppression, and violence” and value God’s universal will beyond the selves’ personal views (Fowler 1991b, 113-14).

The developmental theories discussed above contribute to the understanding of the child and his or her growth. Every child needs to grow up holistically. Time in Figure 8 indicates the children’s growing period from their birth. To seek the child’s holistic development, according to Susan Greener, the child from a young age needs to develop physically, socio-emotionally, cognitively, and spiritually (Greener 2002, 2-3). Each category is important for holistic child development. Moreover, the parents and adults need to understand that integrated development is the ideal growth to capture the full

understanding of genuine child development (Greener 2002, 3; Segura-April et al. 2014, 6-7).

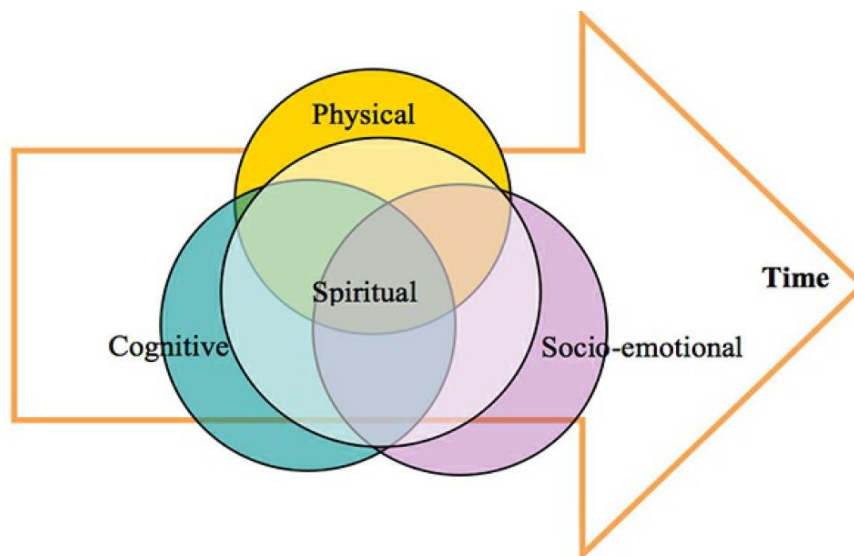


Figure 8: Integral Approach for Children Flourishing (Segura-April et al. 2014, 6).

The children need integral nurture that contributes to the holistic child development as they grow continually. Each development (physical, cognitive, spiritual, and socio-emotional growth) is interconnected and happens simultaneously, not in sequential orders. For example, children do not have to wait for the completion of their physical aspect in order to develop cognitively. Also, they can flourish socio-emotionally as they learn who God is and what he is doing for them from spiritual development perspectives. Thus, to empower children to develop God-given potential, children need safe environments that they can flourish fully in every aspect (Segura-April et al. 2014, 6-8).

The key components of child development include “spiritual life, nutrition, health, intellectual inquiry, socially acceptable behavioral responses to emotional feelings and stimuli, and morally upright society” (Tomkins 2003, 165-67). To achieve the holistic

developmental goals and restore “high self-esteem, empathy, autonomous responsible attitude, coping skills, social competence, communication skills, and emotional regulation skills,” the child needs not only safe and healthy environments but also securely attached figures that can demonstrate unconditional love and care (Greener 2003, 42-46).

Youth Developmental Task: Identity Formation

This study will engage with Grade 10 students in a public high school. Thus, this section reviews adolescent development. In line with this objective, the researcher discusses the identity formation of the youth, which is the developmental task at this stage.

Childhood is a significant period to form a person’s future life like the root of a tree. However, in the contemporary world, children tend to grow up without childhood because of the high speed of changing values that will require their preparation to enter the competitive, material world, and the flood of media (Athriba 2016, 50). It is necessary to consider how adolescents can successfully shape their identity in such a changing world.

Adolescents may be regarded as adults in physical, cognitive, and moral perspectives. However, they are not yet mature in the social aspect (Koteskey 1991, 49-51). Thus, they need guidance and boundaries regarding their behaviors so that they can form a healthy sense of identity.

Identity refers to the notion of ‘who I am’ in three domains: first, sameness between past and present self; second, the integration between one’s private and public self; third, the relationship between one’s present and future self (Atwater 1996, 313-14).

It means that adolescents grow up to be adults through self-exploration as they not only keep their original identity but also adjust or innovate them according to their future challenges. This process influences them to form their own identity. Identity is the developmental task of adolescents (Atwater 1996, 312). Thus, they need to achieve a sound identity for their present and future life. In the course of identity development, when the children reach the adolescent stage, they can have more individualized self-concept and evaluate themselves by reflective thinking of the self and by differentiating themselves from others, including mothers (DeHart, Sroufe, and Cooper 2004, 493; Bowlby 1982, 266-68).

However, as they reject their past or present self and affirm their future self, they face an increasing level of anxiety. This status is called the ‘adolescent identity crisis’ (Atwater 1996, 314). The identity exploration of who they are and commitment to the identity influence their identity achievement status. Adolescents cope with their identity crisis and form different states of identity like the following: “identity achievement, moratorium, foreclosure, and confusion” (Atwater 1996, 316-19).

First, it is identity achievement. Adolescents in an identity achievement quadrant explored their identity enough and found a stable identity. Thus, they acknowledge “who they are” (high identity exploration) successfully. They engage in friendship and romantic relationships independently from their parents. With autonomy, they are confident in decision-making (high commitment). Second, those in the foreclosure quadrant did not experience the identity crisis, so they accept their identity without challenge. They have less confidence in their choice than those in the identity achievement group and struggle with decision-making. Though they had no identity crisis

and they commit to their roles. Third, those in the moratorium experienced identity crises and explored who they were. However, they did not complete their exploration successfully, so they tend to avoid experimentation or conflict. Their parents usually decide for them, so they show a low level of commitment to their choice. They look for their friends or romantic partners as their alternative dependent objects. Fourth, those in the identity confusion group had not experienced an identity crisis yet, so they made no commitment and tend to be absorbed in the society (Atwater 1996, 316-19).

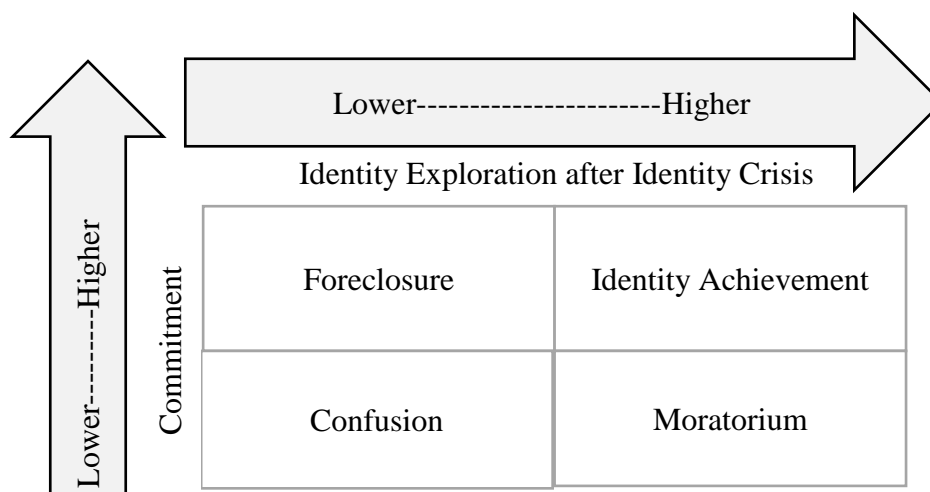


Figure 9: Marcia's Four Identity Stages (Marcia 1991, 314-16, quoted by Atwater 1996, 316-19)

When the youth experience an identity crisis, they need safe boundaries (parents, non-parent adults, and safe communities) to explore their identity fully so that they can form their identity successfully and make their commitment to their role with autonomy. In the course of identity formation, responsive parents and mentors can discipline and guide them to complete this stage.

From a cognitive perspective, youth with ages 11 to 15 are in the formal operational stage. During this stage, the adolescents experience cognitive advances such as logical and systematic thinking, the ability to think about relationships, and their

thinking are more abstract and sophisticated as well as hypothetical and they are capable of inductive reasoning (DeHart, Sroufe, and Cooper 2004, 468; Atwater 1996, 106-7; Richards 1983, 115). Because of their memory advance, they show the improvement of both short- and long-term memory (DeHart, Sroufe, and Cooper 2004, 474). Also, they are capable of the “automatization of basic mental process,” so they process mental, cognitive issues with less effort and more automatic thinking skills (DeHart, Sroufe, and Cooper 2004, 475).

However, formal operation in early adolescence produces four characteristics: ‘pseudostupidity, hypocrisy, personal fable, and imaginary audience’ (Steele 1990, 144-15). Among several factors, pseudostupidity causes them to do over-thinking about their life issues because of the lack of abundant experience in their lives. Atwater states that more experiences and cognitive maturity can remove this pseudostupidity (Atwater 1996, 109). Thus, youth need guidance and wisdom from those who have more experiences than them in various fields: the adult mentors who can challenge them to do active thinking and learn by the discovery (Athriba 2016, 54-55; Richards 1983, 115).

Table 3: Summary of Characteristics of Early and Late Adolescence (Steele 1990, 141-53; Atwater 1996, 114-15).

	Early Adolescence	Late Adolescence
Major Task/ Transformation	Belonging (Competency)	Searching (Identity formation and Intimate relationship)
Cognitive Development (Effect of Formal Operation)	Pseudostupidity Hypocrisy Personal Fable Imaginary Audience	Relativistic Thinking
	Gradual Transition: Dualism (early)-> Multiplism-> Commitment to relativism (late)	

Egocentrism in the youth causes them to develop an 'imaginary audience' and 'personal fable' that also causes their over-thinking (Atwater 1996, 119). The imaginary audience makes them overthink how people think about them. They trust that something commonly happening will never happen to them. This personal fable is the background emotion to display reckless behavior. Thus, they tend to disregard the negative consequence of their risky behaviors.

Early teenagers operate dualistic thinking processes. Dualistic thinking views the world dualistically: right or wrong. However, as they enter the middle stage of adolescence, they demonstrate multiple thinking. It opens the mind to the possibility of a different answer. Thus, they can understand that other people may have diverse thoughts and various possible options. Youth in late adolescence moves from multiple thinking to commitment to relativism (Atwater 1996, 114-15). In this stage, youth depend on specific standards to make better decisions. They need several good examples for better analytical thinking. Formal operational thinking is the trajectory for youth to become mature adults under proper guidance and nurture.

However, excessive Internet use has negative influences on the youth's cognitive development. The concept of "digital dementia," which refers to "deterioration in cognitive abilities that are more commonly seen in people who have suffered a head injury or psychiatric illness," explains that overuse of technology can interrupt cognitive development and cause low academic achievement (Ryall 2013). Problematic internet use affects cognitive development (Tur-Porcar 2017, 1016). Several kinds of research prove the negative consequences of inappropriate internet use such as attention deficit,

cognitive delays, impaired learning, increased impulsivity, and decreased ability to self-regulate (Huddleston 2016, 106; Field 2016, 162).

The Philippines ranked the lowest in reading comprehension and the second-lowest in science and mathematics out of the 79 countries that participated in the 2018 Program for International Student Assessment (PISA) (Mateo 2019). Related to this result, Francisco Duque III, Health Secretary, points out that poverty and excessive use of gadgets cause damage to the child's intellectual development (Mateo 2019).

In the course of adolescents' identity formation, developing a positive self-concept is an important developmental task because it can influence youth's emotional health (Laboviti 2015, 171). The youth concentrate on the strategy of interpersonal relationships not only with their parents, but also with non-parent-adults or with attractive persons (DeHart, Sroufe, and Cooper 2004, 492; Bowlby 1982, 207). The youth establish their self-concept through four factors: first, 'body image' (my feeling about my body), 'self-image' (the self I see myself to be), 'ideal self' (the self I want to be), and 'social selves' (others' perception in me) (Atwater 1996, 303). It means that children construct their self-concept through interaction with their significant people, such as others' reactions and expectations. Also, it implies that they need mothers and other mediating figures for their holistic development.

Self-esteem, which refers to self-evaluation and perception of self-worth, depends on competent performance in their essential area, through supportive, accepting social experience and through the learning of problem-solving-ability (Atwater 1996, 309). Parental responsiveness significantly varies the level of youth's self-esteem (Keizer, Helmerhorst, and Gelderen 2019, 1204). Cold and rejecting parenting styles make the

youth feel less connected to their parents and lower their self-esteem (Kakihara et al. 2010, 1449-50). Adolescents demonstrate high self-esteem when they perceive a good quality relationship with their parents (Keizer, Helmerhorst, and Gelderen 2019, 1211-12). Moreover, youth with high self-esteem are relatively less vulnerable to internet addiction (Cheung 2018, 481). It means that self-esteem can be determined by the positive growing atmosphere where youths can demonstrate their competence with the positive reaction of their significant people.

In sum, when the children experience the developmental transition from middle childhood to adolescent period, they build their identity based on their previous experiences. As they can differentiate themselves from others, they extend their interpersonal relationships from their parents to other individuals. In the course of identity formation, they discover their positive self-concept and self-esteem through positive interaction with their primary attached figures.

Family and Youth Development

Many studies support that the combinations of several parental variables such as parenting style, parenting practices regarding youth's emotional expressiveness and their behaviors, and discipline are directly/indirectly related to harmonious child developments (Baumrind 1966; Hughes et al. 2005; Kochanska, Aksan, and Carlson 2005; Patrick et al. 2005; Boyatzis 2006; Bornsheuer, Garza, and Nichter 2012; Cummings et al. 2013; Sengsavang and Krettenauer 2015). For example, an insecure parent-child relationship formed by guilt-including techniques or indirect threats of loss of love causes the less responsive action of the child (Baumrind 1966, 902). Also, the inhibited anxious child is

raised by maternal insensitive parenting like “over-involvement, self-sacrificing, and overprotection” (Raishevich, Kennedy, and Rapee 2010, 192).

Familial Influence on the Youth’s Behaviors

Both children and youth need parental consistent long-term care and discipline. Discipline in this context refers to “training in wisdom, virtue, and self-control” to empower each child to be more self-controlled (Morgan 1996, 88). To raise a disciplined child, Robert J. Morgan exhorts parents to demonstrate the loyalty of love which treats the child with warmth and tenderness so that they can discipline the child, not break the child’s heart. It develops the child’s compliance. Also, in discipline, parents use “carefully chosen, lovingly given, plainly spoken” reprimand words (Morgan 1996, 91). The adolescent child’s parents need to transit their roles 1) from the controller to companion, 2) from talking to listening, 3) from spending time with them to spending more time with them, 4) from reprimanding to reassuring, especially from dads, and 5) from preaching to praying (Morgan 1996, 78-83). The parenting styles influence their behaviors. When they experience positive, responsive, affectionate, and warm discipline from their significant adult figures, they alter their behavior. While the easy temperamental child is not affected by the level of responsive parenting regarding the level of his or her externalizing behavior or committed compliance, the parental responsiveness makes a significantly positive influence on the outcome of difficult temperament children: more committed compliance and less externalizing behavior regardless of the financially disadvantaged atmosphere (Kochanska and Kim 2013, 327-30).

In the research concerning “Filipino Mothers’ Parental Self-Efficacy and Parental Rejection,” the higher level of maternal rejection caused the higher level of child’s delinquency (Daganzo, Alampay, and Lansford 2014, 11). It proves that parental self-efficacy in managing anger or irritation has an influence on parental behaviors and child development (Daganzo, Alampay, and Lansford 2014, 12). Katherine R. Wilson, Sophie S. Havighurst, and Ann E. Harley affirm this perspective. According to Wilson, the effect of parents' parenting improvement, especially emotional coaching, can contribute to reducing the behavioral problems of their children (Wilson, Havighurst, and Harley 2012, 61-62). Therefore, when the children display symptomatic behaviors, parents pay attention to the children’s stress and the child’s behavioral problem.

M. Renee Patrick, James Snyder, Lynn M. Schrepferman, and John Snyder state the influence of parenting responses on the child’s behavioral conducts: first, parent’s Warmth, Communication, and Tracking (WCT) about early childhood behavior had a certain linkage with late childhood monitoring process and knowledge; second, child conduct problems during elementary school years are related to the quality of parent-child relationship: a child whose parents do WCT parenting conducted fewer over/covert behavior problems than those who had no WCT parenting experience at the entry to elementary school as well as developed less problematic behaviors in kindergarten and the first grade; and third, the combination of three factors- early tracking of child behavior, communication of parent-child dyads and warmth- can be effective to do parental monitoring and to decrease covert conduct problems (Patrick et al. 2005, 1010-11). Moreover, the child’s receptive cooperation with parents could be regarded as a relatively important indicator of the positive socialization force development (Kochanska,

Aksan, and Carlson 2005, 658). These findings support the value of the positive parent-child relationship on the child's behavior formation. Also, they affirm that the child needs parental consistent long-term care and discipline to shape socially acceptable behaviors.

Consistent discipline includes children and youth's internet using behaviors. In 2000, one hundred ninety-one UN members constructed eight Millennium Development Goals, which included child protection (World Health Organization 2000). All the children have the right to be protected for their holistic development (Athriba 2016, 63). Thus, parents and adults should ensure environmental sustainability and protect them from any harmful factors (World Health Organization 2000; Bunge 2012, 9). Unfortunately, many children are at risk as they are exposed to dangerous environments such as harmful internet sites and COVID-19 infectious circumstances. As the pandemic is prevalent worldwide, children have more access to the internet than any other generation in history. It may cause them to fail to reach their "God-given potential" (Segura-April et al. 2014, 4).

In the literature review concerning internet use in adolescence, the main discussion is related to the matter of addiction. Some scholars and authors view internet use as addictive like heroin or porno-addiction. For example, Brad Huddleston, the author of *Digital Cocaine: A Journey Toward iBalance*, notes that the addictive aspects of online activities (Facebook and Online Games) can explain the cause of excessive, problematic internet use. Thus, Huddleston describes excessive internet use as a "drug by another name" (Huddleston 2016, 30-37). Continual online games release dopamine from the brain. This dopamine makes game players crave more and higher stimuli to experience the same level of exciting feeling (Field 2016, 158). In line with this

perspective, when people play online games, the dopamine is released and causes the accumulation of Delta-FosB, which forms the addictive behaviors such as preoccupation of online game influence, lack of control on time consumption, relational conflicts with families and friends, anger-prone-personality (Huddleston 2016, 94-95; Wilson 2012).

However, some scholars state a different perspective regarding the addictiveness of online games. For example, they point out the difference between addictive behaviors and excessive online games. Huddleston defines online video games as another name of the drug. Contrasted to this view, Daniel L. King, Paul H. Delfabbro, and Mark D. Griffiths point out that excessive online game has no object of addiction though addiction to heroin or cocaine use, and even pathological gambling, have specifically defined objects of addiction with associated neurological reward pathways (King, Delfabbro, and Griffiths 2010, 6). It does not mean that there are no negative impacts of problematic internet use. Instead, based on their research, they initiate the objection to the leading strand of literature that views the internet games as an addiction because only a few players become addicted while most of the players are not (King, Delfabbro, and Griffiths 2010, 6). Understanding the self-schema will be helpful to affirm this assertion because addiction matter depends on the state of users' self-schema.

The concept of self-schema (pl. self-schemata) refers to the cognitive generalization of self. It helps understand the tendency of pursuing certain online content and communities. For example, teenagers with positive self-schemata relatively seek to discover gratifying experiences that can increase their positive self-schemata. In contrast, youths with negative self-schemata tend to pay attention to seeking harm-advocating online content such as self-harm and suicide (Oksanen et al. 2016, 4-9). In other words,

some people use an online game to release their stress while few people become addicted and seek harmful content (King, Delfabbro, and Griffiths 2010, 8). It may indicate that the online game player's personality or self-schema, not online games themselves, determines to form addictive behaviors.

Adolescents' emotional problem is connected with their problematic internet use (Păsărelu and Dobrean 2018, 104). Youth with higher self-esteem shows a lower level of internet addiction while depression of adolescents is a predictable factor of their internet addiction (Cheung et al. 2018, 481). This understanding stresses the importance of the child's emotional health. Also, whether online games are addictive or release stress, the literature supports those online activities influence internet users' emotional aspects.

However, positive parenting and the healthy mental states of their parents can contribute to reducing adolescents' problematic internet use (Păsărelu and Dobrean 2018, 107-08). Specifically, a positive relationship with the father decreases his adolescent daughter's pathological internet use and the mother can reduce adolescent sons' pathological internet use through building a positive relationship with her son (Liu et al. 2013, 5).

To protect children and adolescents from the risky online environment, literature challenge parents to do parental supervision on their internet use by increasing structured activities in the home environment for physical and cognitive activities, restricting their children from consuming their money on video game activities, and regulating the hours of playing online games (Huddleston 2016, 112-15; Christakis 2011; King, Delfabbro, and Griffiths 2010, 9).

As adolescents grow up, they demand more autonomy. However, Filipino parents set rules in disciplining their adolescent children and expect them to obey them, so they tend to slow down their children's development of autonomy (Darling, Cumsille, and Alampay 2005, 51-53). In the context of valuing intimate family relationships, Filipino parents' strictness and high control decrease the frequency of displaying risky behaviors. Engagement in proximal risk behaviors (e.g. visiting massage parlors, spending the night out with friends, going to strip shows, etc.) is lower with Filipino youth in high parental controls than those in relatively low parental control (Cruz, Laguna, ad Mejia-Raymundo 2001, 11). Stable relationships between mother and father also predict lower engagement in other risky behaviors like smoking, drinking, drug use, etc. (Cruz, Laguna, ad Mejia-Raymundo 2001, 11-12).

Familial Influence on the Moral Development

Lawrence Kohlberg defined "moral" as "moral judgments or decisions based on the moral judgment" and moral judgments as "judgments about the right and the good of action" (Kohlberg 1980, 53, 55). Copsey stated that moral understanding and emotional understanding are interrelated and family influences children to manage their emotion and make moral decisions (Copsey 2003, 7-8). Thus, the understanding of the moral development may help parents acknowledge what to consider morally for the emotional health of their sons and daughters.

There are three moral stages: "pre-conventional level, conventional level, post-conventional, autonomous or principled level" (Kohlberg 1980, 91-98). At the pre-conventional level, children do moral actions and seek moral values according to socio-cultural rules, but reinforcement (either punishment or reward) influences their moral

decisions. Stage one (punishment and obedience orientation) and stage two (instrumental relativist orientation) belong to this pre-conventional level (Kohlberg 1980, 91). Second, conventional level demonstrates both the “conformity to personal expectations and social order” and loyalty to socio-cultural rules and values (Kohlberg 1980, 91). Stage 3 (interpersonal concordance or good boy-nice girl orientation) and stage 4 (law and order orientation) are included in this level (Kohlberg 1980, 92). Finally, at the post-conventional level, individuals make independent moral decisions or judgments based on “moral values and principles” (Kohlberg 1980, 92). Individuals can reach stage five (social-contract legalistic orientation) and stage six (universal ethical-principle orientation) at this level (Kohlberg 1980, 92-93).

Parenting is a significant element influencing the child’s behavioral patterns. However, it affects broader fields of the child’s development. The quality of parenting regulates the child’s moral development as well as behaviors. Sengsavang and Krettenauer state that children’s experience of negative parent-child interaction and few preferences for moral behaviors cause a high level of aggressive behavior and fewer preferences for moral behaviors while higher levels of parental support and lower levels of parent-child negative interaction are linked to higher moral self-score (Sengsavang and Krettenauer 2015, 2242-26). The authors pointed out the positive influence of warm and responsive parent-child relationship on children’s moral development, especially internalized moral values into their self-concept and preference for moral behaviors regardless of age (Sengsavang and Krettenauer 2015, 226).

According to Angela D. Carpenter, moral formation depends on the four factors: high parental commitment to the child, acceptance, unconditional love, and mutual

responsiveness (Carpenter 2015, 103-04). It means the parental positive support contributes to help the child form moral health. Balswick and Balswick attested to this view. They stated that the positive parent-child relationship can be built by the three stages: first is “the initial covenant” – unconditional love from parent to child; second is “the mature covenant” formed by the initial covenant- unconditional love between parent and child; third is the “Intimacy”- knowing and caring for each other without embarrassment or shame (Balswick and Balswick 1989, 38). It indicates the parents and their child can form a good relationship through the experience of positive affection. Also, it starts from parental love, not the strict rules. Thus, it is important for children to grow up in an environment of a positive parent-child relationship where they can experience parental unconditional love and intimacy. Thus, parents need to know the appropriate parenting practices so that they can build a better relationship with their children. That knowledge and effort will work in a positive way for the child’s moral development.

Chris J. Boyatzis notes that parents, who perceive parenting as a sanctified role, are relatively possible to perform consistent and mature verbal parenting (Boyatzis 2006, 248). Maintaining a good relationship with God and acknowledging God’s involvement in parenting will lead to positive parenting and healthy well-being of the child (Boyatzis 2006, 249). The transformed lives of the converted Christian can help parents understand that parenting is a sanctified role and it will bring about a positive outcome.

After receiving the gift of salvation through the grace of God, humans God’s grace (Rom. 6:14) and the transition from the reign of sin to that of Christ in their lives (Rom. 6:4). As Jesus Christ sanctifies the believers, it leads them to attain new life through the Holy Spirit (Rom. 6:4; Titus 3:5). Christians are baptized by the Holy Spirit

(Mat. 3:11) and they find new life by baptism (Col. 2:12). New believers are not yet fully mature spiritually and the Bible described them as infants who need soft food (1 Cor. 3:1-2). According to Paul's accounts, solid food is not yet appropriate for them, so they need to drink milk until they are ready yet to digest solid food. This analogy supports the characteristic of progressive sanctification. In the course of the lifelong process of growth, God leads every believer (his adopted child) to move gradually from a sinful and immature lifestyle to a mature faith, and holy lifestyle through the indwelling of the Holy Spirit (1 John 4:13) in order to develop in him or her the discipline that will lead to spiritual growth (Eph. 4:16). Following God's way, parents should nurture and discipline their children to grow up to live a holy life according to God's will (Eph. 4:14). In order to achieve this life transformation in every child, parents should depend on God in fulfilling their parental responsibility to help their child grow in faith. Thus, parenting is the sanctified role of parents assigned divinely to them by God and they can only fulfill their roles with faith in God.

The Influence of Parenting on the Youth's Emotion

Parents tend to correct the misbehavior of children rather than their negative parenting practices. However, it is worthy of attention that attachment relationship is helpful to regulate the emotion so that a child can express their feelings genuinely and to develop the strategy to manage the distressful situations with the comfort of a trusted caregiver (Colmer, Rutherford, and Murphy 2011, 18-19). Moreover, when parents participated in the intervention program concerning emotion coaching practice and positive parental involvement, parents reported a significant reduction of children's behavioral problems (Wilson, Havighurst, and Harley 2012, 60-61). It indicates that the

improvement of parenting styles contributed to reducing the behavioral problems of their children and that the positive changes in parenting styles yield the child's mature behaviors. The interrelationship between improved parenting styles and decreased behavioral problems supports that rebuking children's wrongdoings is relatively ineffective to make behavioral changes. Thus, parents need parenting interventions to improve their parenting practices and help their children successfully cope with their misbehaviors. The following research also affirms this perspective.

Janet Strayer and William Roberts performed the research with 50 children in Canada from two-parents-families as the participants were divided into three groups: "Group one had 13 boys and 13 girls (M=9.0 years), there were eight boys and three girls in Group two (M=13.0 years), and Group three consist of eight boys and five girls (M=13.0 years) (Strayer and Roberts 2004, 235). Their parents' mean age for mothers was 37 years and for fathers 39 years (Strayer and Roberts 2004, 247). It assessed children's emotional expressiveness (e.g., "Vignette Viewing, Coding of Facial Expressions, and Vignette Interview") and their empathy through the "Empathy Continuum" (Strayer and Roberts 2004, 236; Strayer and Robert 1997, 390-92). They measured the parenting practices through modified "Child Rearing Practices Q" (CRP-Q) (Strayer and Roberts 2004, 238; 240-42). As result, there is little direct relation between parents' empathy and children's empathy, although parents' empathy has a direct or indirect influence on children's anger (Strayer and Roberts 2004, 247). Their result supports the need for parental interventions to develop their empathic communication skills regarding coping with child anger (Strayer and Roberts 2004, 248). Positive parenting contributes to the healthy expression of children's emotions in a safe,

supportive atmosphere. However, parents should not disregard the importance of discipline in their behaviors. They need to discipline their children's misbehavior as they allow their children to express their emotions in a healthy way. Thus, the parents need to understand the meaning of the symptomatic behaviors and practice emotional coaching skills about the children's careless, inappropriate emotional expressiveness (Wilson, Havighurst, and Harley 2012, 62; Arellano-Carandang 1987, 7). Also, children need guidance and boundary in their growth. However, the researcher ponders if the children will be healthy emotionally as they suffer from the consequence of the pandemic crisis, overuse the internet and experience the transition of family structures. Also, the researcher questions what parents need to consider in their parenting to seek their children's harmonious development.

Jack O. Balswick and Judith K Balswick explained that parenting style has the most crucial impact on children's emotional, social, cognitive, and spiritual development (Balswick and Balswick 1989, 36). Every child needs to grow up in healthy ways, achieving emotional well-being, so parents must understand the positive parental contribution to children's healthy emotional development. For example, first of all, parenting is related to a child's intelligence and emotional growth. Lived-emotional-experiences and framework, or context formed by interacting caregivers, increase the level of creativity and reflection of children (Greenspan 1999, 8). Second, parental control over children's emotionality contributes to the level of children's emotional expressivity. Thus, the more parents control the emotional expressivity, the fewer children express their emotions to others including their parents (Louie, Oh, and Lau 2013, 430). Third, parenting affects the anger of the children. Angry children who need a

mature strategy to manage their anger have parents who practice less empathic and less warm parenting (Strayer and Roberts 2004, 247-48). It emphasizes that warm, empathic, responsive parenting is an important factor that influences positively on the child's healthy emotional development.

The level of adolescents' emotional expressiveness can be different in gender. A study was conducted with 982 students (366 male and 616 female) of grade 7 to 9 (283 students of grade 7; 424 of grade 8; 275 of grade 9) in South Korea to measure the frequency of emotional expressiveness within the family (Kim, You, and Know 2020, 1574). The result showed that female students were more expressive in their families. And the female students who reported positive emotion expressiveness like joy, pride, and respect in their family practice more positive social interaction with their acquaintances and strangers than male students do (Kim, You, and Know 2020, 1576-78). However, both female and male adolescents who reported negative self-expressiveness in their families practiced less prosocial behaviors to their acquaintances and strangers (Kim, You, and Know 2020, 1578).

In Southern Ontario, 83 adolescents (mean age =16.32; SD = 0.47) participated in a study investigating how mothers and peers regulate adolescents' emotions (Lougheed et. al. 2016, 966). The frequency of positive emotion showed no gender difference in the interaction with their mothers, but the frequency of negative emotion was higher with female adolescents than with males (Lougheed et. al. 2016, 967).

Moreover, there is a corresponding relation between parenting and the psychological maturity of adolescents. For example, warm, responsive, supportive parenting contributes to enhancing teenagers' emotional expressivity and interpersonal

competence that influences psychological adjustment (Rohner 2016, 21; Balan 2017, 41-43; Sultana and Khaleque 2016, 48-49; 124-25; Van der Giessen and Bögels 2018, 337; Keizer, Helmerhorst, and Gelderen 2019, 1212-13; Kim, You, and Know 2020, 1578). Moreover, responsive, positive parenting is helpful for youths to form self-esteem and personality development (Rohner 2016, 10-11; Rohner, Khaleque, and Cournoyer 2005b, 312; Ramírez-Uclés et al. 2018, 1340-41; Kakihara et al. 2010, 1449-50). In the course of conflict-solving-conversation through reciprocal reasoned negotiation, the youths acquire the strategy to find alternatives regarding the self and to acknowledge different points of view (DeHart, Sroufe, and Cooper 2004, 510). The next question is what to understand the child's emotional health and how to nurture children to attain emotional development.

Youth's Emotional Health

Stanley Greenspan defines emotions as “internal architects, conductors, or organizers of our minds” (Greenspan 1999, 9). Anxiety, one of the negative emotions, is highly related to fear (Bowlby 1973, 77) as anxiety produces fear. For example, children will experience extreme threats if their parents cause them to worry about being forsaken by or separated from their parents (Bowlby 1973, 226-27). When parents threaten their children to abandon them in the case of failing to reach their expectations or the conflicts of parents, children suffer from overwhelming distress. Their threatening experiences bear their internal worries and fear. Thus, these threatening experiences of abandonment and separation result in forming an anxious attachment (Bowlby 1973, 236). Greenspan states that intelligence and emotional development rely on nurturing environment as well as the unique biological nature of the child (Greenspan 1999, 5-6). Both the child's nature and nurture work together for the child's intelligent, emotional development. Mary D.

Salter Ainsworth states that the environment influences the formation of internal working models (Ainsworth 1985, 787). It implies that the children will be restricted from flourishing their intelligent, emotional potentials (nature) if the children grow in a threatening atmosphere (negative nurturing environment).

In the Philippines context, a negative nurturing environment includes easy access to harmful online environments and the lack of parental discipline in online activities. Parents will admit their limits to regulating online activities though they may restrict the hours of using the internet. Also, the pandemic makes the situation worse because children may be exposed to excessive internet use because of implemented quarantine and because the whole households including children suffer from pandemic-related crises such as financial contraction, insufficient food and healthcare, widespread COVID-19 infection, challenges of online learning, family violence, and emotional struggles (depression, over anxiety, and fear) (Economic Policy Research Institute 2020, 21-38; United Nations Children's Fund 2020, 4-15). Though there are many problems to settle, the researcher narrows down the focus on the child's emotional well-being and parenting styles to enhance the child's emotional health despite various unchangeable issues.

Youth's Emotional Well-being

For the sake of holistic child development, parents need to pay attention to the child's emotional well-being, especially in the pandemic season. Goot stated that emotion affects our character traits formed by the habitual emotional response and the body condition caused by the sympathetic nervous system (Goot 1987, 15-18). It indicates the interrelated linkage between emotion and behavior. For example, the symptomatic behavior, especially in a child, is a sign of some stress, or conflict, within the family

system. Thus, it is vital to figure out the veiled message of the observable behavior to seek the child's emotional well-being (Arellano-Carandang 1987, 27).

Turculet and Tulbure state that the parents' emotional development coefficients were increased from 74.5 (pretest average) to 95 (protest average) and children's result from 76 (pretest average) to 152.25 (protest average) which revealed a more dramatic increase of data average than parents' (Turculet and Tulbure 2014, 374-76). Considering the impact of parental influence, the intervention program for parents' emotional education is significantly necessary for children's healthy personality development.

In line with the needs of parental emotional coaching, Goot noted what parents need to do for the child's emotional growth: that is "emotional partnership." It refers to 1) supporting the child emotionally, 2) enlarging parents' emotional capacity to embrace the child's emotion, 3) keeping balance between emotional dependence and independence through the critical decision of emotional partnership timing, and 4) being responsible for forming ethic of children through religious faith, which is the strength of self-transcending guidance (Goot 1987, 55-60). In other words, the responsive, empathic parenting attitude is helpful to seek the child's emotional well-being. Specifically, parents need to support the child emotionally and embrace the child's emotion with expanded emotional capacity. As parents keep a balance between emotional dependence and independence by determining critical emotional partnership timing, they need to do responsible actions to form the child's spiritual development.

The Need for Good Parenting for Youth's Emotional Health

Moreover, the attachment behaviors sustain in the life span rather than disappear in childhood (Bowlby 1982, 350; Ainsworth 1985, 787). Parents, who have anxious and

avoidant attachment in their childhood, exhibit lower emotional regulation and are less responsive in their parenting than securely attached parents (Harel and Finzi-Dottan 2018, 1520-21). Securely attached adults attain a positive view of life, good coping skills, and an optimistic view of themselves (Peluso et al. 2009, 401).

IPARTheory also affirms the lifespan influence of parenting on children and youth (Rohner, Khaleque, and Cournoyer 2005b, 309; Rohner 2016, 8). Parental rejection in childhood causes psychological maladjustment of children and youth (Rohner 2016, 25-26; Diaz 2020). Specifically, symptoms of perceived parental rejections are depression, depressive symptoms development in adolescence, externalizing behaviors, substance abuse, delinquency, and developmental trauma disorder (Khaleque 2017, 985-86). Interestingly, though perceived parental rejection in childhood and in adulthood is related to emotional problems, perceived parental rejection in childhood can be tolerated by acceptance of attachment figures in adulthood, and remembrance of parental acceptance in childhood functions as a resilient factor to overcome distress in adulthood (Rohner 2016, 21).

Jennifer Bornsheuer, Yvonne Garza, and Mary Nichter recommend divine parenting. It has four aspects: “God’s covenant- unconditional love and acceptance, his grace in discipline, empowering parenting, and intimacy” (Bornsheuer, Garza, and Nichter 2012, 57-62). God is a role model of divine parenting. Through God’s unconditional love, his children can form an attachment to him. Thanks to his grace and forgiveness, they can build intimacy with God (John 10:3-5, 11-15). His discipline teaches them their limits and boundaries (Exod. 20:1-17). His support and control empower his children to be independent, mature Christians who can take the

“discipleship responsibilities for others” (Balswick and Balswick 1989, 36). It is desirable for parents to maintain the balance in their parenting because they can conduct high support through their consistent love, care, grace, forgiveness, and inductive control to seek the children’s mature growth and empowerment.

Empowering parenting is one of good parenting. Empowering is “building up” of one another in the community of faith through loving, serving, and helping them mature in the faith (Balswick and Balswick 1989, 36). In the Bible, there are many empowered believers like David, Stephen, Paul, and Peter. David could solve the problem of Israel against Goliath because he believed God would give him the strength to defeat Goliath (1 Sam. 17: 26, 32-47). David showed his spontaneous participation in the conflict. Stephen could be peaceful in the stoning situation and generous to the persecutors because his intrinsic motivation of faith made him manage the risky situation (Acts 7:56-60). The dramatic empowering incident transformed Saul totally into Paul who dedicated his life to God and explained heavenly things to the world (Acts 9:3-7; Rom. 1:1-2). Peter was a very impulsive man but changed into a faithful, influential apostle and died for the sake of the Gospel when Jesus empowered him (Acts 4:13; John 21:18).

In addition, empowerment has two components: one is the intrinsic factors including motivation, volition, self-image, efficacy beliefs, self-authorization, and self-determination and the other is the external factors like leadership styles, organizational structures, restructuring public sectors, and legal advice access to information (Järvinen 2007, 174). Empowerment develops the ability to solve problems, make decisions, and manage stressful situations, so it can create the belief in problem-solving-competence which activates intrinsic motivation, autonomy, and spontaneous participation (Järvinen

2007, 174-77). If parents empower their children to fulfill their life missions and responsibility, they can lead their children to go through their life challenges without destructive behaviors and strength them to pursue their goals. That is the strength of empowering parenting.

Arnold and his research colleagues interviewed 195 team members and leaders through different three groups: “a clothing retailer, a building products supplier, and a telecommunication corporation” and clarified notional leaders’ behaviors (Arnold et al. 2000, 253-54). Their research showed the eight kinds of characteristics of empowering leadership like the following: “Leading by example” (being role model), “coaching” (teach for the self-reliant of the followers), “encouraging” (acknowledging the effort of the followers to promote high performance), “participative decision-making” (let the followers express their ideas or opinion), “informing” (presenting goals, mission, philosophy), “showing concern” (regard on the well-being of the followers), “interacting with team” (as a whole-treat the follower with respect), and “group management” (Helping the followers have a good relationship) (Arnold et al. 2000, 254-55).

These eight kinds of characteristics of empowering leadership can be observable in Jesus’ leadership: for example, Jesus washed the feet of His disciples to make them follow what he did (Leading by example; John 13:14-15). He gave his disciples the mission to preach the gospel, taught them how to pray and the God’s Kingdom values with parables, and advised them not to seek the reputation (Coaching; Mark 16:15; Luke 11:1; Mark 4; Matt. 23:8-12). Also, he encouraged his disciples to follow him (Encouraging; Matt. 4:19). He gave his disciples the chance to make a decision rather than displaying Do’s lists (Participative decision-making; Matt. 14:15-17). He informed

them what would happen to believers and unbelievers (Informing; Mark 16:16-18). He healed the woman who had been bleeding for 12 years. She was in the crowd, and he was busy visiting the sick daughter of Jairus. However, he did not disregard this lady's needs and healed her (Showing concern; Mark 5:21-34). He answered verbal or nonverbal questions and fed 4000-5000 people with two fish and five loaves of bread (Interacting with the team; Mark 2; John 6). Moreover, he explained why he was with tax collectors and resolved the conflicts of disciples (Group management; Mark 2:13-17; 9:33-37). Jesus's leadership model of empowering others can be applied to parents' way of empowering their children.

In parenting practices, parents need to empower their children as Jesus did for his disciples. Jesus used his power to serve others, forgive others, and empower the weak (Balswick and Balswick 1989, 39). It advocates that parents need to exert their power to serve their children for their maturity, not to reign over them. Parents need to forgive their children's faults with love and empower them to be mature, faithful, independent Christians who can delegate their faithful responsibilities to others. Thus, parents need to dedicate their lives to loving their children and disciplining them with patience and God's guidance.

When children are in challenging situations like the pandemic, parents should pay attention to ensure the children's sound self-respect for their emotional health. According to Joy, sound self-respect empowers children to be responsible, productive, competent adults while low self-respect results in angry, depressive behaviors and sometimes self-rejection- suicide (Joy 2000, 45). Much previous literature affirms that parental influence on child development is significant (Patrick et al. 2005; Wilson,

Havighurst, and Harley 2012; Turculet and Tulbure 2014; Kochanska and Kim 2013) and parents are the source of empowerment to their children so they can become empowered adults. Although it is not easy for parents to empower their children as they grow up, as Joy stated, family in a chaotic world should be the place 1) where they can spend time together to share value and lessons, problem-solving-skills, 2) where they can celebrate special days with warmth and attachment, and 3) where they can express their emotions or problems in trustable circumstance (Joy 2000, 48-51). Parents are responsible for empowering their children so that their children grow with healthy self-respect and emotional health. Aside from parental responsibility, children also have to learn what they can do for their emotional health.

The Need of Emotion Socialization for Self-regulation on Emotion and Resilience

Emotion regulation and coping skills of negative emotions like sadness and anger are included as important developmental tasks for adolescents' emotional health (Velasco 2011, 17). To discipline children in wisdom, virtue, and self-control, parents have parental responsibility for loving them with warmth and gentleness as well as using carefully-selected-nonjudgmental words to rebuke their wrongdoings (Morgan 1996, 88; 91). It is to demonstrate the parents' love and a parental reprimand in the discipline. In accordance with this concern, parents can teach their children to achieve three goals of emotional growth: First, children should build empathy for their emotional richness. Then they discover appropriate behaviors to attain desired consequences through proper emotional expression. Finally, they control the behavior according to the vision and direction of purpose (Goot 1987, 27-44). In this way, children can express their emotions

by conducting self-control to prevent them from doing risky, inappropriate behaviors.

Parents can train and empower children to express their negative feelings adequately and act nondestructive behaviors.

It is essential to express one's feelings in socially acceptable ways. Nevertheless, it is more important to regulate the expression types for humans' emotional well-being. It is a matter of expressivity. Adolescents who positively express their emotion in a positive family climate demonstrate a higher level of empathy and more prosocial behaviors than those in a negative family climate (Kim, You, and Know 2020, 1578-79; Sanders et al. 2015, 412; Eisenber, Cumberland, and Spinrad 1998, 10-13, 19-23, 28-31). However, much empathy is not enough to develop emotional health. Individuals have to undergo even the negative consequence brought about by their negative emotional expressions. For example, Moses failed to fit in and control his actions. In the case of Moses, he lost precious objects-the tablets engraved by God (Exod. 32:15-19). We can fully understand how angry Moses was with the Israelites who worshipped the idol (Exod. 32:15-16). However, "throwing the tablets out of his hands" was not appropriate behavior in response to the cause of his anger (Exod. 32:19-20). God did not accept his aggressive action but instead asked him to make the stone tablets again (Exod. 34:1-3).

Emotion socialization- learning how to express emotions in socially acceptable ways - is an important emotion regulation strategy (Eisenberg, Cumberland, and Spinrad 1998, 2). Youth tend to restrict themselves from seeking parental support to positively deal with their emotion in a negative and cold family climate (Hunter et al. 2011, 430). Adolescents can be competent to develop their emotion regulation skills with parental emotion coaching in positive, warm, and responsive family and peaceful environments

(Criss et al. 2016, 522-25; Mckee et al. 2015, 245; Oppenheimer et al. 2016, 1274; Shaffer et al. 2012, 922-23; Eisenberg, Cumberland, and Spinrad 1998, 31-35; Velasco 2011, 9-11). The best circumstance for adolescents' emotion regulation and socialization skills can be formed by both parents' accepting responsiveness (Hunter et al. 2011, 437; Miranda et al. 2016, 1359).

Responsive family climates and safe environments are significant to strengthen youth's emotional socialization. COVID-19 pandemic, however, seems to challenge these positive factors and partially threaten the possibility of holistic child development. Thus, being resilient in stressful situations will be necessary for adolescents to ensure their emotional well-being.

Resilience refers to “the ability to live and cope in difficult circumstances, the ability to regain strength and normal life after traumas or crisis and the ability to handle stress” (Gunnestada and Thwalab 2011, 169). It strengthens the self to be well emotionally and to sustain the dignity as a human even in risky, overwhelming circumstances. As youth cannot help facing hardship in their reality like the pandemic, Susan Greener exhorts caregivers to “eliminate unmanageable stress when possible” and to “promote resilience in individual children so that they are better able to cope” (Greener 2003, 44). It means that caregivers, especially parents, should do what they can do in their given situation to ensure their safety and raise them to be resilient. Adolescents need to learn how to acknowledge the source of stress to avoid hurting others. When they identify their emotion and stressor, parents and mediating figures (the extended families such as relatives and the faith communities) can cooperate to help adolescents develop their resilient competence to overcome overwhelming stressors (Arellano-Carandang

1987, 3-5). Especially when primary caregivers (commonly parents) are not available or when children grow in dysfunctional families, these mediating figures are significant for children's emotional well-being.

To be resilient emotionally and spiritually, youth restore shalom in relational aspects. Shalom refers to peace. Hiebert views peace as "a proactive process," not the conflict-vacuum-state (Hiebert 2008, 294). The concept of peace as a proactive process includes loving our enemies, seeking justice, forgiveness, and reconciliation for "restorative justice" (Hiebert 2008, 294). This peace leads children to develop a harmonious relationship with others and genuine belongingness to empower the community for mutual growth. Thus, Bryant Myers states that "shalom is the Biblical ideal for human well-being and for flourishing" (Myers 2011, 97). When humans have shalom in their hearts, they can achieve their well-being in their life.

In the relation of shalom to the gospel, Padilla states that "preaching the good news of shalom by Jesus Christ" indicates the inauguration of a new era (Padilla 2010, 95). "The proclamation of the good news of shalom by Jesus Christ," Padilla continues, "brings about a community that embodies the blessings of the new age-the church" (Padilla 2010, 95). It means that individuals can achieve shalom through Jesus and attain their peaceful human relationships and Kingdom-value-laden community in the church.

Moreover, youth need to restore shalom in their relationship with others, especially their wound-givers. Forgiveness means "a legal act, releasing the offender and the offended from the bond of the wound, enabling both parties to let go of the burden" (Miles and Houlihan 2003, 202). It does not mean to erase the sin of wounds-giver. Instead, it is breaking the oppressing chain to enjoy the freedom given by God and to

refuse the secondary wounds caused by the primary wounds. When youth acknowledge their pain and the causes of their struggles with the help of holistic caregivers, they can promote their resilience enough to embrace another wounded hearts with deeper empathy and practical methods by their experiences. In this aspect, resilience functions as the strategy to heal emotional wounds and develop wounded healers.

Through the gospel, people can reconcile with God, restore their dignity as God's image-embedded-creation, and become liberal from all the oppression (Wink 1992, 74). People can be changed when they realize their true identity and their vocation as the children of God. These changed people can be empowered to restore just and harmonious relationships. God wants his children to be transformed in three ways: 1) to change their distorted identity into their true identity (God's children embedded his image), 2) to discover their original vocation as his "productive stewards," and 3) to restore the broken relationship with God's creation so that they can accomplish "right and just relationships" with his creations (Myers 2011, 75; 82). However, it is not a simple event. It is an ongoing process to change choices according to our understanding of our transformed identity, vocation, and relationship (Myers 2011, 3-4; 22).

Writings of Wisdom and Psalms empower children and youth with faith in God to remain faithful and hopeful in their daily lives. All the Wisdom Writings proclaim that fearing the Lord and turning away from evil is the beginning of wisdom and understanding (Job 27:28; Prov. 1:7; 9:10). Also, to fear the Lord refers to hate evil things, pride, arrogance, and perverted speech (Prov. 8:13). Thus, the author of Ecclesiastes defines that human's duty is both fearing God and keeping his commandment (Eccl. 3:11). The book of Proverbs values wisdom and understanding

because wise action produces the “well-being” of humans, but foolish conduct results in “failure, misery, and death” (Brueggeman 1999, 255). It means children and youth who value Biblical wisdom will do wise behaviors and avoid doing foolish actions (spiritually doing evil). Such behavioral self-control can be helpful to form their resilience.

Exceptional to the causal structures (cause-effect between obedience and blessing and between disobedience and destruction) in the Old Testament, the book of Job attests that Job’s suffering (effect) had no relation with sin (cause) because Job was blameless and upright and did not commit any sin before God (Job. 1:1-12). Instead, his faithful response to his suffering was the means to glorify and exalt God (Longman and Dillard 2006, 235). Through Job’s case, children can understand that all the sufferings are not the curses of God. It will help youth set free from false guilt when they encounter distress and overwhelming stressors like the pandemic and family crises. They can imagine how God will change their sorrow into joy and pray for the moment glorifying God after overcoming their hardship.

Based on the understanding of Job’s exceptional suffering, Psalms instruct the faithful attitudes during the sin-unrelated-suffering period. Psalms consist of three main genres “hymns of joy, laments, and thanksgiving” (Longman and Dillard 2006, 246). Life is made up of ups (peaceful, prosperous, happy states) and downs (facing hardship and distress). When the faithful are in the ups, they will do hymns for joy to praise God. During downs, they will sing laments with faithful endurance for an uncertain period. Then when they experience another up after deep downs, they will replace their songs with thanksgiving (Longman and Dillard 2006, 249). This cycle of these three genres is called as “Orientation-disorientation-reorientation” (Longman and Dillard 2006, 246;

Johnson 1990, 33). For example, his peaceful, faithful, and wealthy life (Job 1:1-5) belongs to the state of orientation. If Job were a psalmist, he would sing hymns for joy. Afflicted, suffered life (Job 1:13-41:34) is the course of disorientation, which there may be lots of laments. Restored life after extreme suffering (Jon 42) can be categorized as reorientation that Job might express thanksgiving in his praise. During disorientation, our responsibility is to put hope in God and praise him (Ps. 42:9-10) because he is our salvation and our God (Ps. 42:11; 43:1-5) and because he is Creator and Sovereign (Ps. 89:6-14), our Father, and faithful to his covenant (Ps. 89:26-28). Therefore, the faithful, even in the disorientation period, should fear and praise God because he will protect them (Ps. 89:20-24).

When youth understand orientation-disorientation-reorientation, they can acknowledge that God trains them to surrender everything to him and trust in him in any situation. Then, youth can be resilient to remain calm and look around to discover the light –Jesus Christ- in the darkness like the pandemic. Also, they can hopefully dream a bigger picture of a good, faithful God to protect them. All these practices will make them resilient to grow in faith and in empathy. Through this understanding, youth will remain faithful and hopeful and maintain their emotional well-being in their stressful environments.

Focus on Maternal Responsiveness Related to Youth Emotional Health

It is obvious that parental influence is getting weaker on older youth than younger adolescents (Miranda et al. 2016, 1353-54; Khaleque 2017, 978; Khaleque 2014, 1420; Khaleque and Ali 2017, 442). However, parental responsiveness is significant to

various issues related to youth's emotional health. Two parents acceptance is the best family circumstance for adolescent emotional adjustment and the acceptance of one parent is better than the rejection of both parents (Miranda et al. 2016, 1359).

In the current study, the researcher will examine the extent of perceived maternal responsiveness. A good relationship with the father is associated with the emotional health of young adults (Ki et al. 2018, 2443). However, many studies support that mother is more influential to children and youth than the father. For example, maternal depression is more influential to adolescents' depression than paternal depression (Hunter et al. 2011, 434). The level of maternal interpersonal sensitivity (feeling of inferiority, self-deprecation, and discomfort during interpersonal interactions) is more directly related to adolescents' emotion dysregulation than paternal interpersonal sensitivity does (Suveg, Jacob, and Payne 2010, 678, 682-83). Moreover, mothers maintain more emotionally expressive, flexible interaction than fathers with their youth children which influences youth's emotional health (Van der Giessen and Bögels 2018, 337-39).

Maternal responsiveness significantly matters in the Filipino context. Perceived paternal rejection increase seven times higher psychological maladjustment of Filipino children and youth at ages eight to 18 and perceived maternal rejection shows 13 times higher than paternal influence (Diaz 2020). As the number of overseas Filipino workers (Philippine Commission on Women 2014) increases, the cases of transnational families rise in the context of the Philippines. Parrenas states that children in transnational families build an intimate relationship with their migrant mothers while they feel the gap or are uncomfortable with their migrant fathers (Parrenas 2008, 1059). It implies that the children can maintain more bonding with their OFW mothers than with their OFW

fathers in the case of the transnational parent-child relationship. That is the reason why this research concentrates on mothering even though fathering is vital in youth development as well as mothering.

Summary of Literature Review

In this chapter, the researcher reviewed the historical background of structure changes in Filipino Families to understand Filipino youth's social context and the demographic characteristics of the target area. Filipino families encounter the transition of family structures by the shift of social paradigm. In addition, the Internet is a challenge to parenting practices and adolescents' emotional health. In this changing context, based on the major paradigms of parenting-related studies, the researcher synthesizes the positive caregiver's model and discusses the influence of perceived positive parenting on youth development. Exploring various child developmental theories, the researcher discusses the strength of holistic child development and addresses the need for positive parenting.

The literature reveals the similarity in the attachment theory and IPARTTheory. The researcher discusses the influence of these two factors on youth development, especially their emotional health. It derives the overlapped characteristics of a positive caregiver for the sake of youth development. Parents are the main actors to ensure safe internet use through their digital parenting. The majority of literature affirms the positive, responsive parental acceptance is related to holistic youth development and emotional health.

In this chapter, the researcher deals with the adolescents' developmental task (identity formation) and emotional health to understand the youth's developmental needs

and the relationship between parental acceptance and the youth's emotional health. The researcher points out the importance of the parental discipline to develop positive internet using behaviors and seek emotion socialization for self-regulation on emotion and their resilience. It testifies that adolescents need parental guidance and protection from harmful internet content and problematic internet use.

After discussing the influence of family on youth development, the researcher presents the need for the awareness of emotional well-being, resilience, and emotional socialization. Moreover, the researcher includes the need for good parenting for a child's emotional health. Finally, the researcher discusses why this research focuses on perceived maternal responsiveness as the current study investigates the maternal responsiveness perceived by Grade 10 students.

CHAPTER III

RESEARCH METHODOLOGY AND PROCEDURES

This chapter presents in detail the research methodology, sampling method, instrumentation, and the research process. The researcher analyzed the correlation between perceived maternal responsiveness and the youth's emotional health in Cupang, Antipolo City in the Philippines.

Overview

The researcher investigated the influence of perceived maternal responsiveness on the child's emotional health. This research investigated the answer to the following research question: How does maternal responsiveness influence emotional health as perceived by Grade 10 students in Cupang, Antipolo City in the Philippines?

Description of Research Methodology

In the literature review, the researcher presented the influence of the mother's responsiveness on youth development. Parental acceptance and rejection determine the issue of dependence and independence and the matter of prosocial behaviors (Gulay 2011, 166; Kim and Kim 2015, 370; Tepeli and Yilmaz 2013, 588; Rohner, Khaleque, and Cournoyer 2005b, 310-11; Daganzo, Alampay, and Lansford 2014, 11; DeHart, Sroufe, and Cooper 2004, 428).

The literature support that a mother's responsiveness influences the youth's emotional development and health. The researcher examined how perceived maternal responsiveness influences the youth's emotional health. In view of this, the researcher made use of the quantitative data to discover the relationship between perceived maternal responsiveness and the Filipino youth's emotional health, especially their healthy emotion expressivity. Hence, this study is quantitative descriptive research because it helps describe the features of a specific individual, situation, or group through questionnaires and comparing variables (Kothari 2004, 19-20). Through the quantitative descriptive research method, the researcher could collect data about the current situation in the target area by comparing the relationship among variables. Thus, this research is quantitative descriptive research. The researcher used a structured questionnaire form to collect the quantitative research data regarding the perceived parental responsiveness which influences the youth's emotional health in the selected families of the target area.

For the data collection related to the perceived maternal responsiveness, the researcher used Rohner's Parental Acceptance-Rejection Questionnaire (PARQ). PARQ contains four scales: 1) warmth/affection, 2) hostility/aggression, 3) indifference/neglect, and 4) undifferentiated rejection (Rohner 2005, 43). It aimed to observe how much the mother's responsiveness (either acceptance or rejection) influences the child's emotional health.

The original version consists of 60 items and the short version contains 24 items. The researcher selected the short version composed of eight items of warmth/affection (possible score 8-32), six items of hostility/aggression (possible score 6-24), six items of indifference/neglect (possible score 6-24), and four items of undifferentiated rejection

(possible score 4-16) as the short version has proven its validity and reliability in other studies (Rohner 2005, 44; 106; Rohner and Ali 2016, 2-3). Child PARQ Short Form total possible score can be from 24 to 96 and the score ranges indicate that lower scores mean more acceptance (possible total score range 24-59), while the higher scores indicate more rejection (possible total score range 60-96). Among different types of PARQ, the research chose the short version Child PARQ to measure the perceived maternal responsiveness as the short version is useful to regulate the adequate time duration of data collection. Thus, the researcher adopted the short version of PARQ in this study. The researcher purchased the Child PARQ instrument. It was translated and proven to be valid and reliable by the IPARTheory's author and his research team.

Child PARQ measured how the youth perceived the responsiveness of his or her mother. The subject of each item is "my mother" and each item describes maternal responsiveness. For example, "My mother says nice things about me" and "My mother pays no attention to me" are the sample items of Child PARQ. The response is stated in a four-point Likert scale (four = almost always true, three = sometimes true, two = rarely true, and one = almost never true). Item number 13 is reverse-scored. The score range is from sixty (representing the maximum perceived acceptance) to 240 points (indicating the maximum perceived rejection) and the time duration is usually five to 10 minutes to complete the short forms of Child PARQ (Rohner and Ali 2016, 2).

The researcher examined the child's emotional health through the Emotional Expressiveness Scale (EES). EES aims at measuring to what extent the individuals express their emotions outwardly (Kring, Smith, and Neale 1994, 934; Chan et al. 2010, 44). The original form contains 40 items, but the researcher chose the short version which

consists of 17 items because it reveals high reliability (Kring, Smith, and Neale 1994, 937). Sample items such as “I think of myself as emotionally expressive,” “I display my emotions to other people,” and “People can read my emotions” indicate the emotion expressivity while other items like “I don’t like to let other people see how I’m feeling,” “Even if I am feeling very emotional, I don’t let others see my feelings,” and “Even when I’m experiencing strong feelings, I don’t express them outwardly” are cases of suppression of emotion (Kring, Smith, and Neale 1994, 938; Chan et al. 2010, 46). Each statement scores different values: never true (numeric value one), untrue (two), somewhat untrue (three), somewhat true (four), true (five), and always true (six). Items 1, 2, 5, 6, 8, 9, 11, 12, 14, 16, and 17 are reverse-scored because those items represent suppression of emotion (Chan et al. 2010, 46-47). A Filipino translator translated an EES short form into Filipino as the EES questionnaire is already validated by the source.

Mother’s Responsiveness (acceptance or rejection) is categorized as an independent variable to identify how Filipino youth perceive their mothers’ responsiveness as acceptance or rejection. The researcher investigated if the perceived maternal responsiveness has a direct influence on the dependent variable, which is the youth’s Emotional Health, and if it is significantly associated with the extent of Filipino youth’s emotion expressivity. The researcher compared the differences in the perceived parental acceptance and rejection between age, genders, the relationship of significant female parent/caregiver, and the length of co-residing years with a significant female caregiver. For this comparison, demographic information such as age, gender, the relationship of significant female parent/caregiver (usually mothers), and numbers of years residing with a significant female caregiver, was treated by descriptive statistics, so

a T-test was conducted to test the null hypothesis (Kothari 2004, 131-32; Elst 2019, 113). The distribution of two variables-the perceived maternal responsiveness and emotional health- was summarized by using frequency (n) and percentage (%) to present the central tendency of the collected data. To measure the correlation of these two variables, the researcher used Spearman's coefficient of correlation because this technique could show either similarity or dissimilarity between two variables (Kothari 2004, 138-39). Inferential analysis was applied to test the hypotheses (Kothari 2004, 131). In short, the researcher used descriptive and inferential statistics to analyze the collected raw data and JASP software was used for all the calculations such as the frequency, T-tests, and spearman rho correlation.

Research Design

Quantitative research is applicable to studies that measure the correlated relationships among variables and represent the quantitative data analysis (Kothari 2004, 3; Ary et al. 2010, 26). Thus, this study employed the quantitative approach using survey questionnaires.

Since the target school used Google Meet as their online learning platform. Thus, with the permission of the principal and parents, originally the plan was to conduct the survey solely through Google Meet. However, in the process of recruiting participants, it was found out that not all Grade 10 students have access to the internet. Therefore, the data collection was done both through Google Meet and through offline paper and pen method to collect the data measuring the perceived maternal responsiveness and the Filipino youth's emotional health in the target area. The researcher adopted the short version of PARQ and EES, as many studies demonstrate its validity and reliability

(Rohner 2005, 44; 60; Dedeler, Akun, and Batigun 2017, 185-89; Tsaousis, Giovazolias, and Mascha 2012, 224; Chan et al. 2010, 48; Kring, Smith, and Neale 1994, 937).

Selection of Subjects: Dealing with Sample and Population

The researcher selected the Grade 10 as target subjects because of their readiness of cognitive competence and emotional transition in the developmental aspect. They are cognitively mature enough to do abstract and more sophisticated thinking as well as hypothetical and inductive reasoning (Atwater 1996, 106-07; DeHart, Sroufe, and Cooper 2004, 468). Moreover, identity is the developmental task of adolescents, so they are thinking about who they are (Atwater 1996, 313-14). The children experience emotional growth as they go through their middle childhood and increase their empathy for others (DeHart, Sroufe, and Cooper 2004, 425).

Prior to data collection, the researcher submitted an application form and required papers to the Institutional Review Board (IRB) of Asia-Pacific Nazarene Theological Seminary (APNTS). After receiving the permission of IRB, the researcher contacted the principal of the target high school in order to get official permission.

The total number of Grade 10 students in the target school was 648 youth in School Year 2021-2022. The researcher used the Slovin's formula to determine the sample size needed (Prado et al. 2011, 101).

$$n = \frac{N}{1 + Ne^2}$$

Where N is population size and margin of error is 0.05, the researcher could determine a sample size (n). As the total population was 648 Grade 10 students, the adequate sample size was 247 students for this study.

For the selection of the sample, the researcher sent the request letter to the principal of the target school (Appendix H) to get permission for the survey. After sending the letter of approval from the principal, the principal assigned two school teachers as the research assistants for the current study. They translated the consent (Appendices K and L) and the assent forms (Appendices M and N) to the Filipino language and released them to the whole population of Grade 10 students (648 students) and their parents and waited to see how many would consent to participate in the survey. As a result, the researcher was able to gather 250 respondents (79 online and 171 offline) out of 648 students.

Development of Instruments

The researcher used two kinds of self-reported questionnaire forms to collect quantitative research data ‘CHILD PARQ: Mother (Short Form)’ to measure the perceived maternal responsiveness and EES to examine the Filipino youth’s emotional health. They are useful to examine how the perceived maternal responsiveness influences the youth’s emotional health in the selected families of the target area. Based on the Cronbach’s coefficient alpha, which proves the internal consistency of items and its reliability (Rohner 2005, 52), the standard form of PARQ shows the high reliability as shown below:

Table 4: Internal Consistency-Reliability Coefficients (Alpha) for the Mother Version of the Adult and Child PARQ Scales (Validity-Study Version)
(Rohner 2005, 54)

<i>Test & Scale</i>	<i>Adult</i>	<i>Child</i>
<i>PARQ</i>		
Warmth/Affection	.95***	.90***
Hostility/Aggression	.93***	.87***
Indifference/Neglect	.88***	.77***
Undifferentiated Rejection	.86***	.72***
<i>CRPBI</i>		
Acceptance	.86***	.80***
Hostile Detachment	.87***	.66***
Rejection	.82***	.65***
<i>BPB</i>		
Physical Punishment	.71***	.75***

*** $p < .001$

Table 5: Convergent Validity Correlations Between Adult and Child PARQ Scales and Validation (Criterion) Scales (Rohner 2005, 61)

<i>PARQ Scales</i>	<i>Validation Scales</i>	<i>PARQ Version</i>	<i>r</i>
Warmth/Affection	CRPBI, Acceptance	Adult	.90***
		Child	.83***
Hostility/Aggression	BPB, Physical Punishment	Adult	.43***
		Child	.55***

Approximately 400 studies in various countries, including America, prove the convergent validity of PAQR. Warmth/affection scale of PARQ and validation scale reveal the high correlation coefficient (adult, $r = .90$; child, $r = .83$), and hostility/aggression scale of PARQ and validation scale are aligned (adult, $r = .43$; child, $r = .55$) (Rohner 2005, 54-61). The reliability and validity of PARQ are coincident with PARQ short form (PARQ/S). Meryem Dedeler, Ebru Akun, and Aysegul Durak Batigun prove the construct validity of PARQ/S through exploratory factor analysis (EFA), criterion-related validity by measuring correlations between the total and subscale scores of Mother and Father forms, and Discriminant validity through the total scores of the

Parent's Behavior Inventory (PBI) Mother and Father Forms (Dedeler, Akun, and Batigun 2017, 185-89). Cronbach alpha internal consistency coefficients of adult PARQ/S Mother form (from .75 to .92), test-retest reliability coefficients (from .40 to .83), and item-total correlation (from .45 to .82) affirm the strong reliability of PARQ/S (Dedeler, Akun, and Batigun 2017, 189). These results support that Rohner's instrument is universal. Thus, the researcher applied the reliable and valid PARQ/S instead of the 60-item standard form in this study.

Participants answered the EES to examine the emotional health of the sample population of this research. EES is the self-report type questionnaire that measures both positive and negative emotions expressed outwardly (facially, vocally, or gesturally) (Kring, Smith, and Neale 1994, 934). Statistically, the 17-item-EES, the short form of EES, has high reliability (average alpha = .91; correlation of four-week-test-retest = .90) (Kring, Smith, and Neale 1994, 937).

Table 6: Descriptive Statistics and Reliability Coefficients for the 17-Item Emotional Expressivity Scale Across Samples A-F (Kring, Smith, and Neale 1994, 938)

Sample	<i>M</i>	<i>SD</i>	<i>Mdn</i>	Min	Max	Cronbach's α
A (<i>n</i> = 373)	64.67	12.97	66	25	96	.90
B (<i>n</i> = 102)						
Time 1	67.76	12.23	69	37	95	.92
Time 2	68.58	11.43	69	35	97	.93
C (<i>n</i> = 127)	64.17	11.83	64	37	91	.90
D (<i>n</i> = 28)	61.18	12.04	60	37	91	.90
E (<i>n</i> = 100)	62.58	13.59	63	28	89	.93
F (<i>n</i> = 97)	62.97	12.31	63	34	92	.90

Note. For Sample B, the test-retest interval was 4 weeks: Time 1 represents the first administration; Time 2 represents the second administration. Min = minimum; Max = maximum.

The research with the Chinese sample also revealed the internal consistency and high reliability (Cronbach's alpha coefficients for the total scale = 0.816) (Chan et al. 2010, 48). Based on the tested reliability, the researcher adopted the short form of EES in the questionnaires. Youth filled out the demographic information. The researcher used the translated questionnaires in Filipino for comprehensive approaches through online and offline methods.

Pilot Test

The researcher needed to conduct the pilot test with a minimum of five to ten Grade 10 students in the target area (Johnson and Christensen 2014, 298). The researcher contacted ten Grade 10 students in Barangay Cupang for the pilot test by the help of her church members. Thus, the researcher sent 'Assent Form for Parents for Pilot Test' to their parents through Messenger (Appendix J). When the researcher received the signed assent forms from their parents, ten Grade 10 students participated in the pilot test. The researcher included the Grade 10 participants to test the comprehensiveness of questions. The participants were not the students of the target school. Moreover, their responses were not included in the actual data of the current study. The researcher conducted the pilot test three weeks before the actual data collection to reflect on the feedback of the participants of the pilot test. After receiving the assent forms from the parents of the participants of the pilot test, the researcher invited them and met them in the Google Meet and gave them the links to the instruments (Demographic Information, CHILD PARQ: Mother (Short Form), and EES) translated in Filipino. Once the participants completed all the instruments, the researcher listened to their feedback on the adequacy of time duration and the comprehensiveness of questions. It took five to 10 minutes to answer the whole

questionnaire and participants of the pilot test responded that they understood all the survey items. However, two of the participants reported that they had to scroll up again to see the Likert scales and suggested presenting the scales more frequently for the participants' convenience. Thus, the researcher edited the format to present the Likert scales per five to six items that fitted one screen. However, the researcher did not change the paper survey format because the participants could see the Likert scales on the top of every page.

Data Collection and Recording

Because of the impact of the pandemic, the researcher needed to conduct the data collected online. Before conducting the surveys, the researcher received approval from the Institutional Review Board (Appendix G). The researcher sent the letter to the principal to get permission to do the surveys (Appendix H). After the researcher received the official approval from the principal (Appendix I), the researcher arranged the data collection schedule with the research assistants assigned by the principal through Facebook messenger and emails. The researcher needed two school teachers to be research assistants whose mother tongue is Filipino and who have official access to the students. The principal recommended two teachers to be the research assistants.

The researcher sent the Consent and Assent forms to the research assistants to translate them to the Filipino language (Appendices K, L, M, and N). The research assistants reproduced those forms and sent them to the 648 Grade 10 students and to their mothers. The research assistants waited to obtain their consent to participate in the research. Participation is contingent on parental permission. Those who did not send back the consent and assent forms were automatically excluded from the list of the participants.

Prior to the data collection, the researcher met with the research assistants via Google Meet to orient them before the actual data collection regarding the purpose of the research, the importance of confidentiality, the anticipated timeline of the research, and the data collection procedures that were done through emails. Aside from these, the researcher went through the survey questionnaires with the research assistants to make sure that every item was clearly understood. The research assistant filled up the Agreement to Maintain Confidentiality (Appendix P) before the actual data collection. The research assistants sent the tokens of appreciation to the participants after the surveys were done. However, the researcher did not mention giving the love gifts to the participants before the surveys to make sure that the participants' responses will not be affected by the love gifts.

Among the 648 Grade 10 students, 79 youth and their mothers sent back the signed consent form and assent form to indicate their willingness to participate in the survey online. The researcher and the research assistants met with the 79 students through Google Meet on December 1, 2021. The researcher explained the purpose of the current study and advised the students not to stay in one item too long. Then, the research assistants sent the links to the questionnaires to the participants. The students did not have any questions related to the survey items. Thus, the researcher and the research assistants did not need to clarify the survey items while the participants were partaking in the survey. They reported their completion and asked whether or not they should remain in Google Meet after submitting their responses. The researcher told the participants to leave Google Meet if they have finished answering the questionnaire. The research

assistants were proficient in the English language, so the researcher could communicate properly with them.

After the online survey was completed, the research assistants suggested conducting the survey offline using paper and pen for students who do not have access to the internet. This is to increase the number of participants to reach a minimum of 247 participants required by the statistician based on the Slovin's formula that determines the sample size needed (Prado et al. 2011, 101). They explained that many students do not have access to the internet. After relating this concern to the advisor and the statistician and with their permission, the researcher confirmed with the research assistants how many students would be willing to participate in the offline survey. The research assistants were able to recruit 171 participants to participate in the offline survey, and they helped the researcher distribute and collect the printed assent and consent forms from 171 students. Thus, the researcher finalized the number of Grade 10 participants who were willing to participate in the offline survey via paper and pen and conducted the survey with them. The total number of participants was 250 Grade 10 students.

After collecting the data, the researcher recorded the data in Microsoft Excel and analyzed it through the relevant statistical tools with the help of a professional statistician to discover the answers to the research questions and state the interpretation of the data in the dissertation. The researcher had two Zoom meetings and several communications with the statistician through Messenger and Email to analyze and interpret the statistical data properly. The following are the steps that the researcher took for data collection:

- Step 1. Get permission from the school principal
 - A. The researcher sent the letter to the principal to ask her permission to conduct the survey.

- B. Upon approval of the principal to conduct the survey, the researcher arranged with the principal via FB messenger or emails for the specific schedule for the data collection.
- Step 2. Sending of Consent forms and Assent forms to the participants
 - A. The researcher sent the Consent and Assent forms to the research assistants and requested the research assistants to reproduce the hard copies for the participants responding offline.
 - B. The research assistants sent the Consent and Assent forms to the 648 Grade 10 students and they received the forms.
- Step 3. Preparation for the Administration of Survey Questionnaires
 - A. The researcher sent the two sets of Survey Questionnaires (PARQ and EES) to the two research assistants to be converted to Google forms.
 - B. The researcher received permission from the principal to orient the two school teachers to be the Research Assistants in the Google classrooms.
 - The roles of the two Research Assistants were to clarify and answer questions that might arise while the participants were taking the survey.
 - The researcher sent the Google links to these survey questionnaires to the Research Assistants according to the principal's recommendation.
 - The researcher oriented the two Research Assistants about the purpose of the research, the importance of confidentiality, the anticipated timeline of the research, the data collection procedures, and went through each item in the survey questionnaire.
 - C. The researcher asked permission to create one Google Meet.
 - One Google Meet was set up to include all the participants.
 - D. After the researcher collected the responses of youth that were willing to partake in the survey, she informed the principal that she was ready to conduct the surveys in the Google Meet
 - The Research Assistants informed the participants of the date and time to sign in to the Google Meet for taking the survey.
 - Once inside the Google Meet, the Research Assistants provided the Google link to the participants to access and answer the survey questionnaires.
 - For those not consenting to participate in the surveys, they were not provided the link to access the Google Meet as well as the survey questionnaires.
 - For those who were willing to answer the hardcopy survey, the research assistants gave the survey forms to the participants when the participants came to school to claim their school lessons. Then the research assistants received the responses of the participants on the same day the participants received and answered the survey forms.
 - E. After the participants completed the online survey, the data was submitted directly to the email of the researcher. In the case of hard

copy surveys, the researcher received the answered forms when she came back to the Philippines.

- Step 4 Data collection, recording, and analysis
 - A. The researcher collected, sorted, recorded, and analyzed the data.
 - B. To maintain confidentiality, the participants did not indicate their names on the survey questionnaire. The online data will be deleted and the hard copies of data will be shredded once the dissertation has been completed.

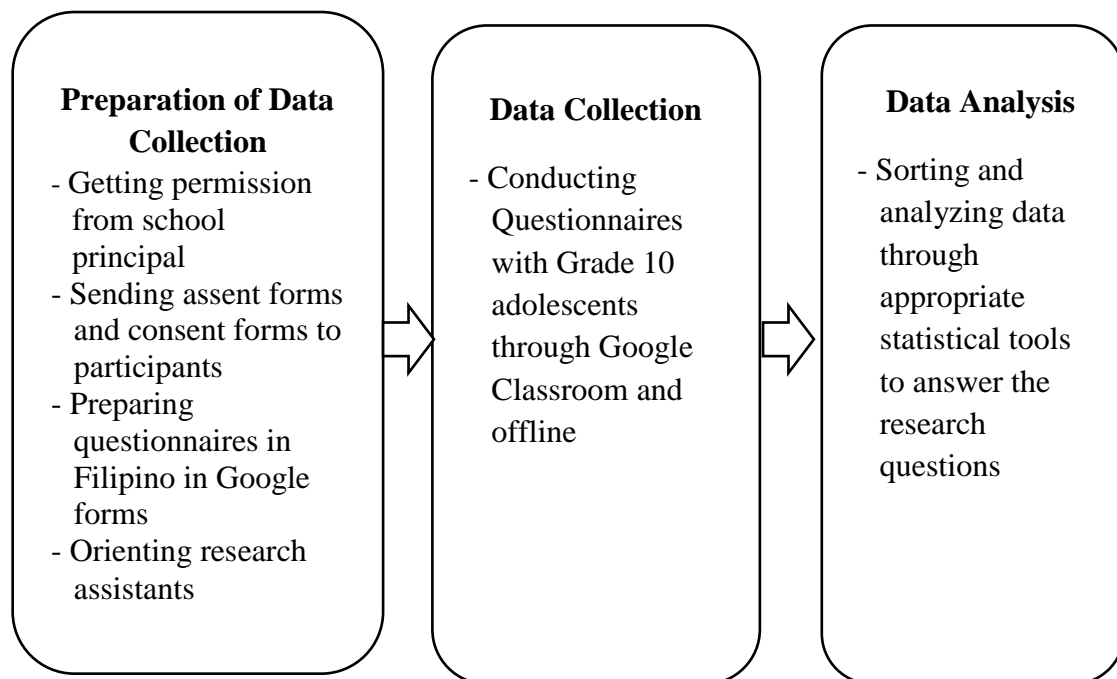


Figure 10: Procedure for Data Collection and Analysis

Data Processing and Analysis

As it is quantitative research, the researcher interpreted the data to acknowledge the correlation between the perceived maternal responsiveness and Filipino youth's emotional health. To analyze the collected data, the researcher used descriptive and inferential statistics methods. To answer research question one, the gender distribution of the youth was presented as frequency (n) and percentage (%), while the age of the selected youth participants was presented using mean and standard deviation.

To answer research question two, the perceived parental acceptance or rejection was measured using the ‘CHILD PARQ: Mother (Short Form).’ Possible total scores of the short form are between the lowest 24 (representing maximum perceived acceptance) and the highest 96 (representing maximum perceived rejection) and the midpoint are 60 (Rohner 2005, 48). To summarize the distribution of youth with these categories, the researcher used frequency (n) and percentage (%) using the following formula:

$$Percentage = \frac{n_i}{n} * 100$$

where n_i represents the counts for each category. EES was treated in the same way to interpret the result of EES so that the researcher could answer research question three.

To answer research question three, the spearman rho statistic was calculated using the following formula:

$$\rho = 1 - \frac{6 \sum_{i=1}^n d_i^2}{n(n^2 - 1)}$$

where the ρ is the spearman’s correlation coefficient, d_i is the difference between the ranks of perceived maternal responsiveness and youths' emotional health. The statistician filled up the Agreement to Maintain Confidentiality before he accessed the collected data (Appendix Q). After the statistician was done with the statistical analysis, the researcher identified the themes that emerged, analyzed them in light of the theories and other literature related to this study. It was to acknowledge the dominant tendency of the perceived maternal responsiveness in the target area and interpret the correlation between the perceived maternal responsiveness of the participants and their emotional health.

Summary

This research is quantitative research conducted with the Grade 10 students in the research area to examine the perceived maternal responsiveness in the target area. It is to reveal the relationship between the perceived maternal responsiveness and the child's emotional health. It can also contribute to increasing the understanding of the prevalent responsive styles of mothers in the target. In line with these goals, the researcher adopted two instruments: one was the 'CHILD PARQ: Mother (Short Form) and the other was the 'Emotional Expressiveness Scale (EES).'

CHAPTER IV

PRESENTATION, ANALYSIS, AND INTERPRETATION OF DATA

Parental responsiveness (acceptance and rejection) significantly influences children's development (Rohner 2021, 3). Positive, warm acceptance can form positive emotional independence and prosocial behavior outcomes (Rohner, Khaleque, and Cournoyer 2005b, 309-11; Rohner 2016, 7-8). This study focuses on measuring perceived maternal responsiveness of the Grade 10 students in Cupang, Antipolo City and the relationship of their perception of maternal responsiveness and their personal perception of their emotional health. Moreover, it aims to answer what demographic variables influence the Grade 10 students' perception of maternal responsiveness and emotional expressiveness and how PARQ scores correspond with EES scores.

This chapter presents the findings and analysis on the demographic information of the Grade 10 students in the target area, the predominant perception of maternal responsiveness, and the influence of the perceived maternal responsiveness styles on the adolescents' emotional health, especially their emotional expressiveness.

The Demographic Characteristics of the Selected Grade 10 Students of Cupang, Antipolo City in the Philippines

What are the demographic characteristics of the selected Grade 10 students of Cupang, Antipolo City in the Philippines in terms of Age, Gender, Relationship of

resident female parent/caregiver, and Numbers of years residing with a significant female caregiver?

Descriptive and inferential statistics were used to represent the demographic information of the adolescents in the research area. Table 7 summarized their demographic information, such as their age, gender, relationship with their female caregiver, and numbers of years residing with a significant female caregiver. In this survey, 250 Grade 10 students participated. The current research divided the age of the participants into two groups according to their social standard of maturity as age 18 below is considered as minors. There were 218 respondents whose ages were 18 below and 32 respondents whose ages were 18 years and above. However, most of the participants are fifteen years old ($n=116$; mean 15.96; standard deviation (SD) ± 1.68).

Table 7: Demographic Profile of Participants

Characteristics	Values
Age, Mean \pm SD	15.96 \pm 1.68
Gender, n(%)	
Male	107 (43%)
Female	131 (52%)
Unspecified	12 (5%)
Relationship of female caregiver, n (%)	
Biological Mother	211 (84%)
Stepmother and Father	5 (2%)
Other Female Caregivers	34 (14%)
Residing with a significant female caregiver, n (%)	
No	27 (11%)
Yes	223 (89%)
Length of time in years, Mean \pm SD	15.12 \pm 3.35

The gender distribution of the participants was presented as frequency (n) and percentage (%). Among 250 adolescents, 107 respondents (43%) were male students, 131 (52%) were females. However, 12 respondents (5%) did not specify their gender. They did not mark their gender, so their gender was classified as “unspecified” (Figure 11). Unfortunately, there was no way for the researcher to find out the reason why the 12 respondents (5%) did not specify their gender.

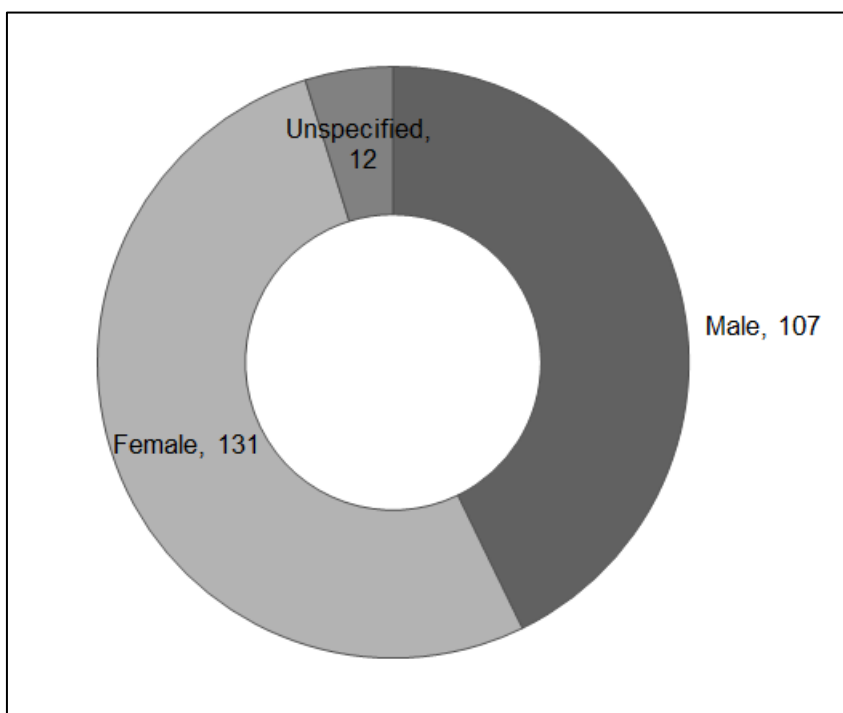


Figure 11: Distribution of Participants by Gender

According to the participants' demographic profile (Figure 12 and Table 9), 211 respondents (84%) live with their biological mothers while five students (2%) reside with their stepmothers and their fathers and 34 students (14%) with other female caregivers. Also, among the 250 respondents, 223 students (89%) have resided with their significant female caregivers for fifteen years (mean = 15.12; SD \pm 3.35). However, 27 respondents (11%) out of 250 students reported that they do not live with significant female

caregivers. This could mean that their significant caregivers are their fathers or other male relatives such as grandfather or uncle.

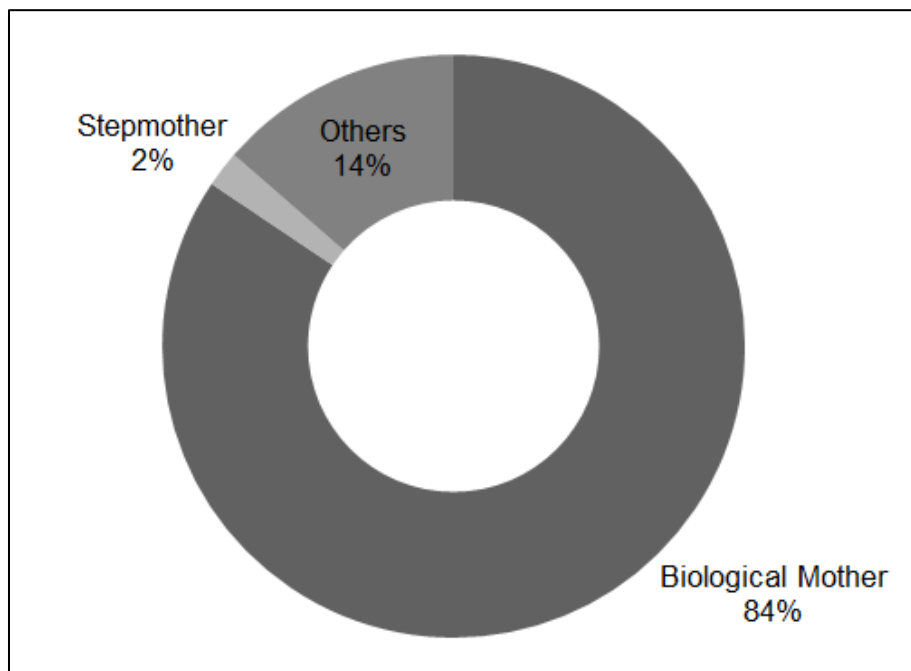


Figure 12: Relationship of Female Caregiver

Demonstration of Either Acceptance or Rejection of the Mothers of the Selected Grade 10 students in Cupang, Antipolo City as Measured by CHILD PARQ: Mother (Short Form)

Do the mothers of Grade 10 students in Cupang, Antipolo City in the Philippines demonstrate either acceptance or rejection as measured by CHILD PARQ: Mother (Short Form)?

H_{01} : There is no difference between participant responses to the CHILD PARQ:

Mother (Short Form) when compared based on age, gender, the relationship of significant female parent/caregiver, and number of years residing with a significant female caregiver.

H₀₂: The mothers/female caregivers of Cupang, Antipolo City in the Philippines, as perceived by selected Grade 10 students, demonstrate neither acceptance nor rejection as measured by CHILD PARQ: Mother (Short Form).

Table 8 shows the comparison of PARQ scores with demographic profile characteristics. A p-value lower than 0.05 indicates a significant difference between two groups among given characteristics. And higher PARQ score means perceived maternal rejection, while a lower PARQ score indicates perceived maternal acceptance. An independent t-test was applied to examine the difference between PARQ scores and demographic characteristics such as age, gender, and residence with a significant female caregiver.

Age is divided into two groups: below 18 years old (218 respondents; mean PARQ = 48.03) and 18 years old and above (32 respondents; mean PARQ = 49.22). As its p-value is 0.184, there is no significant difference in participants' ages. In gender comparison, there are 107 male respondents whose mean PARQ scores are 47.27 and 131 female participants whose mean PARQ scores are 48.73. The gender p-value is 0.233, so gender comparison with PARQ scores shows no significant difference. Also, residing with significant female caregivers does not show a significant difference between those who live with their significant caregivers (223 respondents with 47.99 mean PARQ) and those who do not live with their significant caregivers (27 respondents with 49.81 mean PARQ).

Table 8: Demographic Profile and Child PARQ

Characteristics	n	Mean PARQ	SD	p-value
Age				
Below 18yo	218	48.03	9.74	0.184
18yo and above	32	49.22	6.1	
Gender				
Male	107	47.27	9.31	0.233
Female	131	48.73	9.41	
Unspecified	12	48.5	8.96	
Relationship of female caregiver				
Biological Mother	211	45.98	5.61	0.014
Stepmother and Father	5	50	7.2	
Others	34	49.21	9.62	
Residing with significant caregiver				
No	27	49.81	10.06	0.324
Yes	223	47.99	9.27	
Numbers of years residing with significant female caregiver				
0 to 5 years	29	51.59	8.32	0.002
6 to 10 years	5	47.81	11.05	
more than 10 years	216	45.20	9.38	

Note: p-value <0.05 means significant difference

Note: Independent t-test, ANOVA

However, a significant difference was found in the relationship of female caregivers. There are three sub-categories in the relationship of female caregivers: biological mother, stepmother, and others. Thus, ANOVA was used to test the p-value of the relationship of female caregivers and mean PARQ scores. Among 250 participants, 211 respondents answered that they lived with their biological mother and scored mean PARQ 45.98. Five respondents live with their stepmother, and their mean PARQ scores are 50. And thirty-four respondents reside with other female caregivers such as aunts and grandmothers and their PARQ mean scores are 49.21. The result showed a significant difference among the three sub-categories with a p-value of 0.014.

Moreover, it is found that there are significant differences in terms of the number of years residing with significant female caregivers (p-value=0.002) (Table 8). The

researcher divided the participants into three groups: the first group was those who have lived with their significant female caregiver for five years or less than five years (length = 0 to 5 years), the second group was those who have lived with their significant female caregiver less than 10 years (6 to 10 years), and the third group was those who have lived with their female significant female caregiver more than 10 years. Those in the first group (n=29; length=0 to 5 years) scored 51.59 (PARQ mean; SD =8.32). Those in the second group (n=5; length = 6 to 10 years) got 47.81 (PARQ mean; SD=11.05). Those in the third group (n=216) scored 45.20 (PARQ mean; SD=9.38). It means that respondents perceived the highest level of maternal acceptance when their co-resident length with their significant female caregiver was more than 10 years.

As presented in table 8, there is no significant difference between PARQ scores and the age (p-value = 0.184) and gender (p-value = 0.233). It means that age and gender have no significant influence on PARQ scores of the current study. Instead, the relationship of the resident female parent was a more influential factor that differed in the PARQ scores.

However, previous literature showed that there is a difference related to age and gender. The research conducted in Italy by Miranda in 2016 with 2624 adolescents (1316 boys and 1308 girls) showed the difference in gender and ages. In Miranda's research, male adolescents reported more parental rejection than female adolescents, and early adolescents (mean age = 11.82 years, range 10-13) perceived more parental rejection than middle adolescents (mean age = 15.61 years, range 14-16) (Miranda 2016, 1354-55).

Another study was done with 983 Spanish children and adolescents (449 boys: M= 13.17, SD = 2.60; 534 girls: M= 13.03, SD = 1.93) and it used PARQ to investigate its

relationship with adolescents' emotional unresponsiveness. The result showed that boys reported more unresponsive emotionally than girls due to their parental rejection, but their age did not have a significant difference (Ramirez et al. 2018, 1342).

Unlike the two studies conducted in Italy (Miranda 2016) and in Spain (Ramirez et al. 2018), PARQ scores in the current study done in the Philippines were not influenced by age and gender. Instead, with regards to the relationship of the participants with the resident parent/caregiver, there are differences in the participant's responses to the current study. The respondents residing with biological mothers experience more acceptance than those residing with stepmothers and fathers and those living with other female caregivers such as aunties and grandmothers (see Table 8). According to the literature on maternal responsiveness, the authors claim that maternal responsiveness is more influential in the youth's emotional health than paternal influences (Diaz 2020; Van der Giessen and Bögels 2018, 337-39). Maternal depressive symptoms influenced the peer problems of adolescents, their depression, and their emotion dysregulations more than paternal conditions (Cummings et al. 2013, 227; Suveg, Jacob, and Payne 2010; Pășărelu and Dobrea. 2018). Suveg, Jacob, and Payne discovered that the youth experience social problems and emotion dysregulation when mothers feel inferiority in interpersonal relationships (Suveg, Jacob, and Payne 2010, 682). The authors explained that the youth would look at the social situations as their mothers do because mothers are regarded as the significant role models for their social and emotional development (Suveg, Jacob, and Payne 2010, 683). It can be interpreted as follows: the youth can be emotionally and socially healthy if mothers demonstrate a positive attitude. Diaz states that the youth can improve their psychological adjustment through warm parental

acceptance (Diaz 2020). Significantly, in the Filipino context, the perceived maternal rejection influenced the psychological maladjustment of Filipino children and youth more negatively than paternal rejection (Diaz 2020). Diaz also agrees that parental acceptance is important to develop the youth's emotional health. Moreover, her result affirms that maternal acceptance is more influential to the youth's emotional health. It may indicate that the youth's emotional health can be enhanced by empowering mothers to practice positive acceptance.

Furthermore, it can be attributed to the differences in culture and social system. Based on Rohner's socio-cultural system model- a subtheory of IPARtheory, children can interpret their parents' responsiveness differently according to their culture and social system (Rohner and Lansford 2017, 431; Rohner, Khaleque, and Cournoyer 2005b, 308-09; Lansford et al. 2010, 2, 11). For example, when Rohner interviewed a Hindu lady in India, he learned that Bengali children perceived maternal affection when they received a peeled and seeded orange without any verbal praise (Rohner, Khaleque, and Cournoyer 2005b, 308). This culture is quite unique to Bengali and is an example of the different ways children from different cultures perceive parental acceptance. In the Philippines, Filipino children can perceive parental responsiveness as acceptance when they acknowledge their parents' sacrificial love and support to provide for their basic needs and to raise them up, carrying with them a strong social sense of 'utang na loob' (indebtedness) towards their parents (Alampay and Jocson 2011, 58; Cruz, Laguna, and Mejia-Raymundo 2001, 8). In the current study, 84% of the respondents live with their biological mothers. It might suggest that they could have had many chances to observe and experience their mothers' sacrificial support for their daily needs and education. Thus,

this could have led them to feel warm maternal responsiveness regardless of their gender. Parental responsiveness is a symbolic and subjective notion in IPARTheory that individuals develop in their cultural context (Rohner 2016, 6; Rohner and Lansford 2017, 427). Therefore, the cultural difference may yield different results as the respondents perceive affection in different ways.

For Hypothesis H₀₁ of Research Question 2, the result shows that there is no significant difference in the participants' responses to Child PARQ: Mother Short Form in terms of age and gender, as well as those residing and not residing with their significant female caregiver. However, for the relationship of resident female parent/caregiver, the result shows that there are significant differences in the participants' response to Child PARQ: Mother Short Form among those residing with their biological mother, those residing with their stepmother, and those residing with other female caregivers such as aunties and grandmothers. Thus, the data reject hypothesis one that "There is no difference between participant responses to the CHILD PARQ: Mother (Short Form) when compared based on age, gender, the relationship of significant female parent/caregiver, and number of years residing with a significant female caregiver."

The Summary of Child PARQ was presented in Figure 13. The researcher corresponded with Dr. Rohner via several emails to clarify the definition of the categories in his scoring scale. In the email conversation regarding this question, Rohner explained that the categories in scoring Child PARQ Short Form were used as "guidelines about the meaning of different ranges of points on the measure" and advised not to take them too literally and use them to interpret PARQ scores (Rohner 2022).

PARQ Short form total score can be classified into two categories-acceptance (score range 24-59) and rejection (60-96). Acceptance has four sub-categories with a gradual decrease of acceptance level like the following: first, ‘perceived acceptance’ (score range 24-47). It is the one end of the warmth dimension and indicates the most positive accepting responsiveness. Second, ‘more acceptance than rejection, but not qualified acceptance’ (score range 48-51) is the next lower level of acceptance. Third, ‘signs of significant rejection’ (score range 52-55) indicates that the respondents received specific rejection more than acceptance. Fourth is ‘significant rejection, but not more overall rejection than acceptance’ (score range 56-59).

Rejection has three sub-categories: ‘perceived rejection-serious rejection’ (score range 60-79), ‘very serious rejection’ (score range 80-91), and ‘profound rejection’ (score range 92-96) (Rohner 2022).

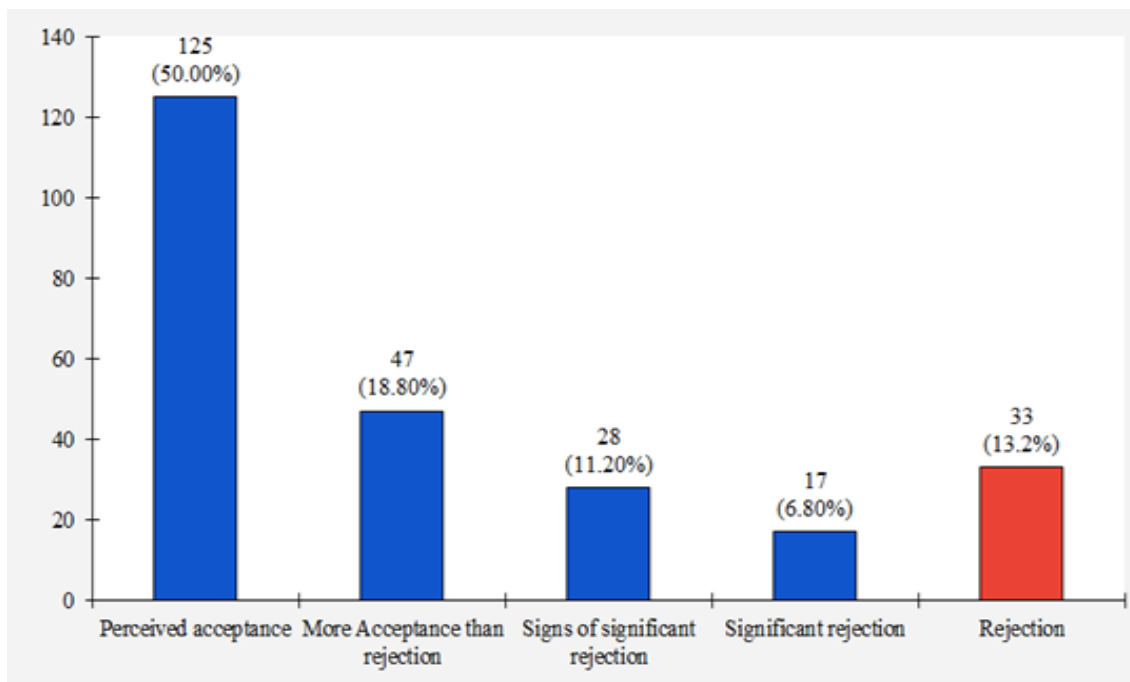


Figure 13: Summary of CHILD PARQ

The above data reveal that among the 250 participants, 125 respondents (50.00%) perceived acceptance from their mothers. It was found that 47 respondents (18.80%) perceived their mothers' responsiveness as 'more acceptance than rejection, but not qualified acceptance.' It means that the respondents felt accepted more than rejected, but their acceptance is not enough to be qualified as acceptance. However, 28 respondents (11.20%) felt signs of significant rejection. The answers of 17 respondents (6.80%) showed 'significant rejection, but not more overall rejection than acceptance.' It means acceptance with some rejection, but their perceived rejection is not as many as those in the rejection category. If the researcher sums all the four sub-categories of the Acceptance dimension, 217 respondents out of 250 perceived maternal acceptance with different PARQ points (see Figure 13).

There was no case reporting profound rejection. However, one respondent perceived maternal response as very serious rejection, and 32 participants reported 'perceived rejection-serious rejection. In short, 33 students out of 250 (13.2%) perceived maternal rejection.

Thus, the data reject hypothesis two of Research Question 2, that is "The mothers/female caregivers of Cupang, Antipolo City in the Philippines, as perceived by selected Grade 10 students, demonstrate neither acceptance nor rejection as measured by CHILD PARQ: Mother (Short Form)."

Respondents chose "almost always true" (green highlight in Figure 14) regarding warmth/affection items. Results showed that 145 respondents out of 250 students (58%) reported that their mothers almost always say nice things about them. Then 149 out of 250 (59.6%) perceived that their mothers almost always make them feel what they do is

important, and 155 respondents (62%) answered that their mothers always almost let them know their mothers love them. Furthermore, 162 respondents (64.8%) reported that their mothers almost always treat them gently and kindly.

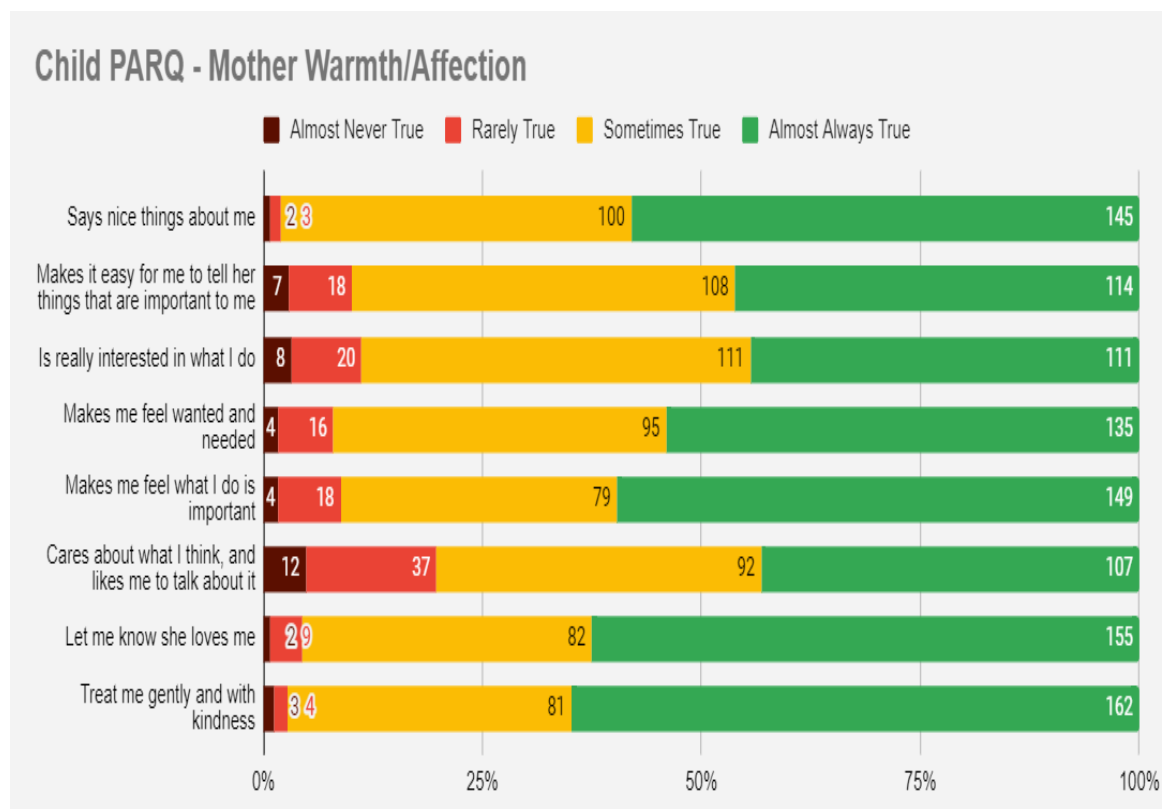
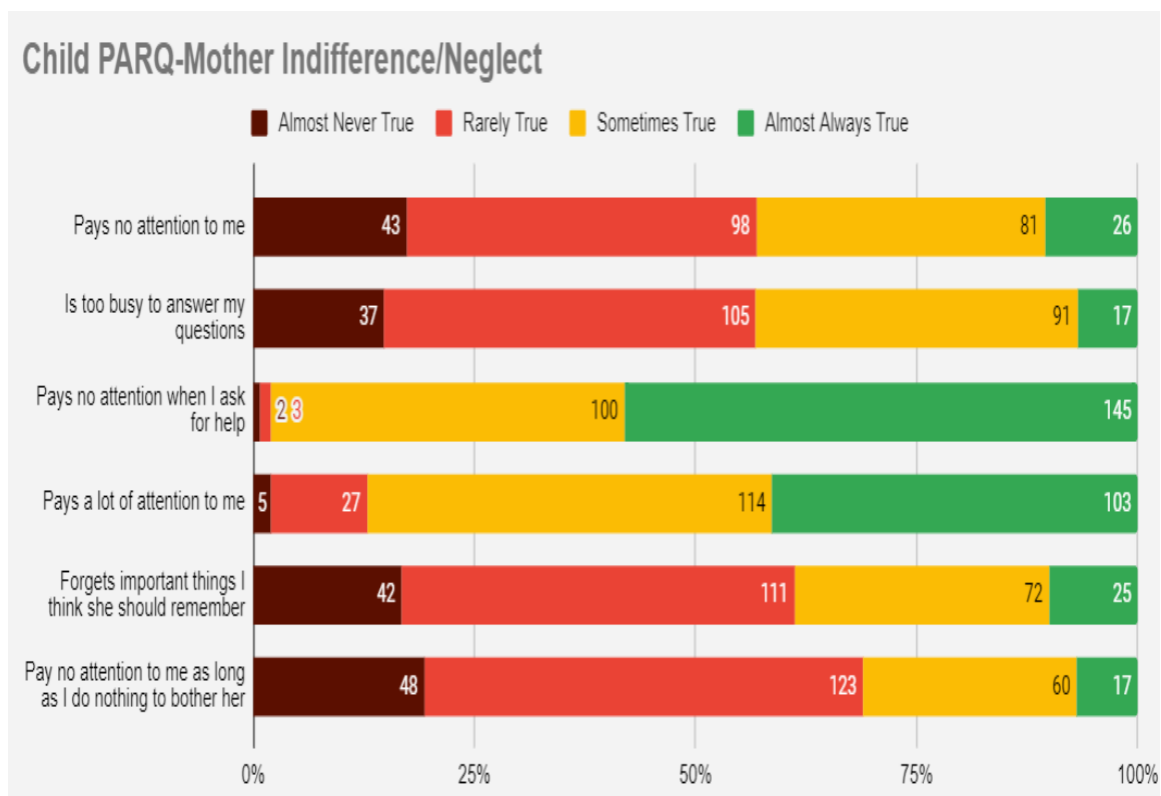


Figure 14: Child PARQ – Mother Warmth/Affection

However, the result found that roughly half of the respondents marked ‘almost always true’ (green highlight in Figure 15) in their response to one item from the Indifference/Neglect dimension: 145 students (58%) perceived that their mothers paid no attention to them when they asked for help (Figure 15). Moreover, 100 respondents (40%) responded that their mothers sometimes paid no attention when they asked for help. However, 103 respondents (41.4%) perceived their mothers always paid a lot of attention

to me and 114 adolescents (45.8%) answered that their mothers sometimes paid a lot of attention to them (Figure 15).



Note: Some participants did not mark some of the survey items. In that case, the researcher counted those who answered as the total population.

Figure 15: Child PARQ-Mother Indifference/Neglect

According to IPARtheory, adolescents generally perceive their parental responsiveness subjectively (Jager et al. 2016, 2109-11; Limanta 2019, 10, 25; Rohner, Khaleque, and Cournoyer 2005b, 308). They perceive their parental acceptance and rejection according to their “unique perspective of parental rejection” (Jager et al. 2016, 2119). Jager and his co-researchers state that youth perceive their parents’ responsiveness subjectively with their unique perspective of parental rejection. The adolescents feel parental rejection when they hear hurtful words and experience emotionally painful behaviors though they generally perceived that they are loved by their parents (Jager et al.

2016, 2109). In their longitudinal study (two waves with one-year interval) with the early adolescents, Jager and his researchers found that the adolescents' subjective, unique perspective of parental rejection influences their internalizing and externalizing of problems (Jager et al. 2016, 2117-19). This is a meaningful finding supporting the idea that adolescents perceive parental rejection subjectively. Their perceived rejection impacts them negatively (emotional and behavioral maladjustment) as IPARTheory postulates the negative influence of the parental rejection. Therefore, aside from differences in cultural and social systems, a person's subjective perspective can also influence one's perception of parental responsiveness.

Perceptions of maternal attention in terms of physical and psychological attentiveness and inattentiveness can be based on a person's subjective perspective. In the Indifference/Neglect dimension, the term "Indifference" indicates a parental internal and psychological state, while the term "Neglect" means parental behaviors showing their indifference (Rohner, Khaleque, and Cournoyer 2005b, 305-07; Rohner 2016, 4-5). Rohner, Khaleque, and Cournoyer state that indifferent parental emotion towards their children yields neglecting behaviors such as no attention to their children's needs and parental physical and psychological unavailability (Rohner, Khaleque, and Cournoyer 2005b, 305-07).

In the current study, half of the respondents perceived their mothers were attentive to them on the survey item 'pays no attention to me.' This response might suggest a moderate level of maternal attention. Then, when they answered the survey item 'pays a lot of attention to me,' most respondents perceived the high level of maternal attention (Figure 15). The different levels of maternal attention might suggest that respondents

might recall the different experiences subjectively when they answer each survey item. The kinds of attention may vary: mothers in the target area might show a high level of attention to their children's basic needs, study, and health. However, it might be possible weak attention to their children's identity formation, emotional health, or internet activities. Then respondents might sense different levels of maternal attentiveness subjectively. Thus, although maternal acceptance in the target area might not be ideal, the respondents perceive maternal acceptance as they reported from moderate to high attentive maternal responsiveness because the majority of the respondents (86.8%) perceived maternal acceptance and emotional expressiveness even though they perceived some level of maternal indifference towards them (Figures 12, 13, and 15).

On the survey item 'pays no attention when I ask for help,' the majority of respondents reported the inattentive tendency of their mothers (Figure 15). The respondents perceived that their mothers did not pay attention to them when they asked for maternal help. This result did not indicate what specific kind of help the respondents requested or why they asked their mothers to help them. However, 100 respondents answered that their mothers were 'sometimes' inattentive to their request for help and 145 respondents perceived that their mothers were 'almost always' inattentive to their request for help (Figure 15). This result affirms the need for parents to explain to their children the reason why they accept or reject their request for help. This is to avoid misunderstanding by the adolescents of their parents that may lead them to harbor the feeling of rejection. The parents' explanation can help the adolescents to develop metacognition. Metacognition is the awareness and understanding of one's own thought process involving reflecting on and evaluating one's own thinking (Berk 2001, 372-74).

Hence, upon understanding the real reason why their parents refuse to provide help, the adolescents can now match their subjective perception to the real reason and avoid feeling parental rejection.

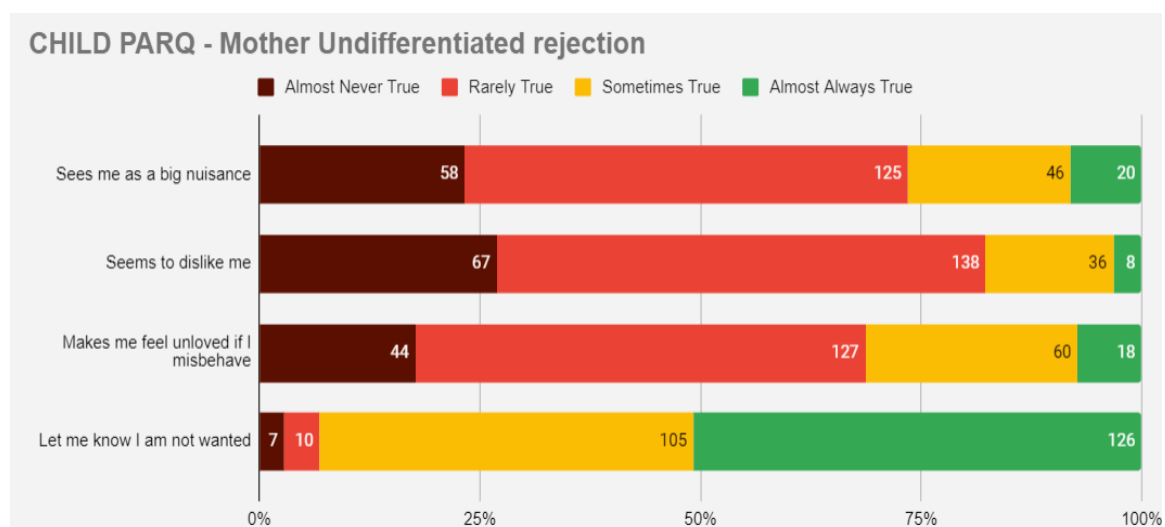
Furthermore, the survey items on maternal attentiveness, both for physical and psychological availability and providing help to their children, raise the importance of providing physical and emotional care for the mothers in the target area. In other words, the mothers may need intervention programs (see Appendices R and S) to nurture their physical and emotional health and thus be empowered to be physically and psychologically available to their children and to provide help when they need it.

In IPARTheory, the issue ‘if someone perceived to be loved or rejected’ holds more important attention than the literal meaning of two opposite concepts – acceptance and rejection in IPARTheory (Rohner, Khaleque, and Cournoyer 2005b, 326). Rohner explained that parents tend to be unaware of their small actions to be perceived as ‘parental rejection’ by their children even though the intentions of those small actions were not meant to show rejection (Rohner 2005, 67). Thus, the youth can think they were rejected to some degree while they generally perceive loving, supportive, warm acceptance from their parents. When adolescents demand their autonomy from their parents, they can sense some degree of rejection if their parents refuse their autonomy and demand more compliance to the parental authority. In the Philippines, Filipinos value smooth interpersonal relationships and obedience to parental authority. Thus, usually Filipino children tend to obey their parents’ authority. However, parents may not be aware that their children would perceive the parents’ refusal or delay of granting their children’s autonomy as parental rejection while the parents’ intention is to protect their

children from risks. According to the study of Cruz, Laguna, and Mejia-Raymundo (2001, 8), if the youth receive parental control and maintain a stable relationship with their parents, they lowered their engagement with risky behaviors such as smoking, drinking, drug use, and commercial sex (Cruz, Laguna and Mejia-Raymundo 2001, 12).

Moreover, every culture has different forms of communicating love between parents and children, and children can perceive them as parental acceptance (Rohner, Khaleque, and Cournoyer 2005a, 25). Thus, the youth would change their unique perception of parental rejection to understand the supportive acceptance of their parents when they become mature by getting older.

Many respondents marked ‘almost always true’ to answer one survey item from the Undifferentiated rejection’ dimension: 126 respondents (50.4%) perceived that their mothers always almost let them know they were not wanted (green highlight in Figure 16) and 105 respondents (42.3%) marked “sometimes true” about the same item (orange in Figure 16).



Note: Some participants did not mark some of the survey items. In that case, the researcher counted those who answered as the total population.

Figure 16: Child PARQ-Mother Undifferentiated Rejection

The majority of respondents chose ‘rarely true’ (red highlight in Figure 17) or ‘almost never true’ (brown highlight in Figure 17) to answer items in the Hostility/Aggression dimension. Regarding the PARQ item “punishes me severely when she is angry,” 133 respondents (53.2%) out of 250 students reported their mothers rarely punished them severely because of their anger and 63 participants (25.2%) perceived their mothers almost never did it. In the case of PARQ item “says many unkind things to me,” 136 respondents (54.4%) perceived that their mothers rarely said unkind things to them and 43 students (17.2%) reported that their mothers almost never did so. However, 50 respondents (20%), which is slightly higher than those who chose “almost never true,” responded that their mothers sometimes said unkind things to them (Figure 17).

Interestingly, the result showed the peer comparison with different degrees (one participant did not check this item): 82 respondents (33%) perceived that their mothers sometimes regarded other children were better than their children, and 32 respondents (13%) almost always perceived it. Their numbers are approximately similar to those who did not perceive the peer comparison: 96 respondents (38.6%) rarely experienced it and 39 participants (15.7%) almost never perceived it (Figure 17).

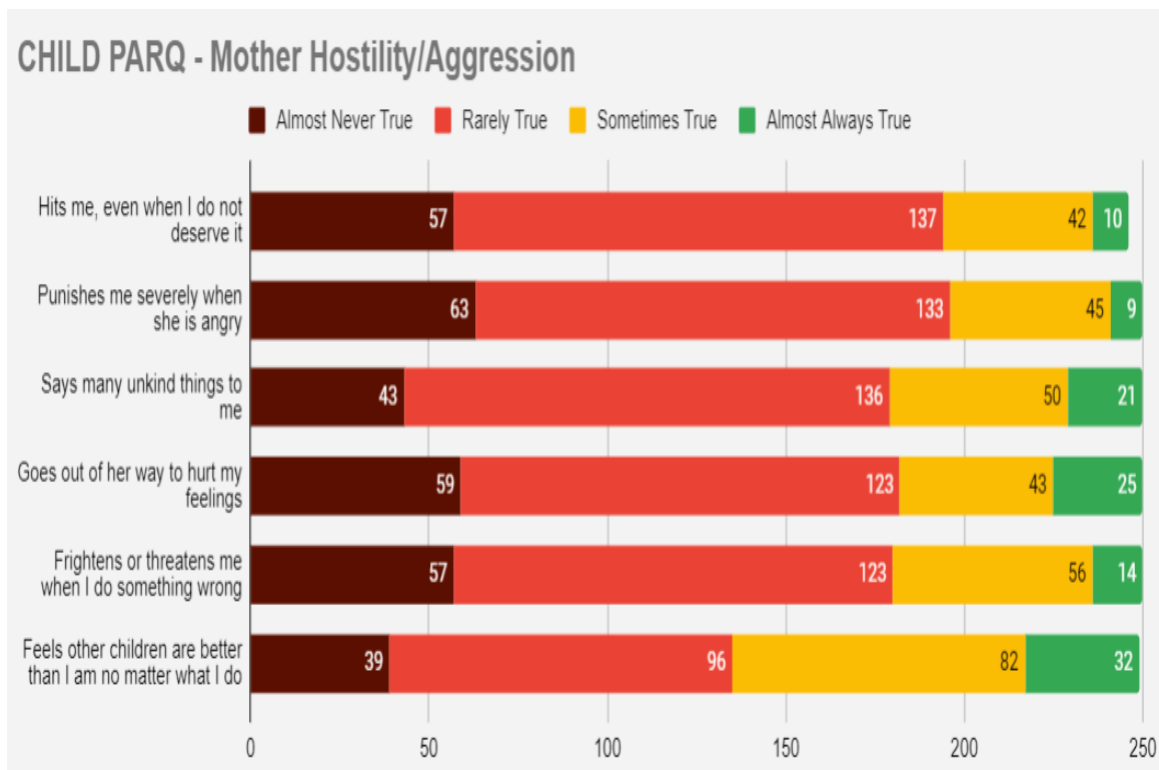


Figure 17: Child PARQ- Mother Hostility/Aggression

The findings of the current study support that the mothers/female caregivers of Cupang, Antipolo City demonstrated either acceptance or rejection. For the PARQ and demographics, there is no significant difference in the respondents' PARQ scores in terms of age and gender. However, those residing with their biological mothers perceived maternal responsiveness as acceptance compared to those residing with their stepmothers and fathers, and those residing with other significant female caregivers. Moreover, the number of years residing with a significant female caregiver influences the level of perceived maternal acceptance.

**The Influence of the Perceived Maternal Responsiveness
on the Emotional Health of the Selected Grade 10 Students**

Does the perceived maternal responsiveness, as measured by selected Grade 10 students, influence youth's emotional health?

H₀₃: Perceived maternal responsiveness does not influence the selected Grade 10 students' emotional health.

Table 9 presents correlation between PARQ and EES. Respondents who marked 'almost always true' (equivalent to point 4 in Likert scale) in items of warmth/affection showed high positive correlation (0.79; p-value = 0.021) with EES scores. However, high negative correlation was found in two groups of respondents who selected 'almost always true' (equivalent to point 4 in Likert scale) in indifference/ neglect (correlation = -0.74; p-value = 0.015) and hostility/ aggression (correlation = -0.82; p-value <0.01). Respondents in the group of undifferentiated rejection showed moderate negative correlation (-0.52) with p-value 0.049, which means moderate negative relationship between PARQ and EES.

Table 9: Relationship of Child PARQ and EES

Child PARQ	Correlation	p-value	Interpretation
Warmth / Affection	0.79	0.021	High Positive Relationship
Indifference / Neglect	-0.74	0.015	High Negative Relationship
Hostility / Aggression	-0.82	<0.01	High Negative Relationship
Undifferentiated Rejection	-0.52	0.049	Moderate Negative Relationship
Total	0.76	0.011	High Positive Relationship

According to Table 9, those with high scores in the Warmth/Affection dimension showed a high positive correlation between Child PARQ and EES. However, those with high scores in the Indifference/Neglect dimension formed a high negative relationship. It

means that those with high scores in the Warmth/Affection dimension were emotionally expressive and those with high scores in the Indifference/Neglect dimension were emotionally suppressive. Many scholars affirm that adolescents' emotional expressiveness and interpersonal competence that influence psychological adjustment are associated with warm, responsive, supportive parenting (Rohner 2016, 21; Balan 2017, 41-43; Sultana and Khaleque 2016, 48-49, 124-25; Van der Giessen and Bögels 2018, 337; Keizer, Helmerhorst, and Gelderen 2019, 1212-13; Kim, You, and Know 2020, 1578). Furthermore, Rohner also states that there are copers who cope with their rejected experiences with their coping skills, resilience, and mediating factors (Rohner 2021, 19). It means that adolescents need warm, responsive, and supportive parenting for their emotional expressiveness. However, they can also be copers even when they are associated with maternal rejection. Nevertheless, the majority of respondents in the current study perceived maternal acceptance and are emotionally expressive. According to Rohner, copers use their coping skills and mediating factors to reduce the negative influence of their rejected experiences (Rohner 2021, 19). Thus, it might suggest that there are many resilient copers among the respondents in the target area and received positive influence from their other mediating factors that enhance their emotional expressiveness and help them to focus more on the warm and affective acceptance than some memories that they experienced maternal indifference.

Perceived parental responsiveness influences the respondents' emotions and behaviors universally through the demographic characteristics (age, gender, relationship of significant female caregiver, and numbers of years residing with significant female caregiver) that identify the influential factors in determining the perceived understanding

of acceptance and rejection are not the same in different cultures. Rohner states that cultural differences may influence the different understanding of acceptance and rejection. However, regardless of cultural differences, children can perceive whether they are accepted or not within IPARTheory's continuum (Rohner 2021, 37-39).

The relationship between the Child PARQ category and EES was presented in Table 10. It compared the respondents in each category of Child PARQ with their EES scores to identify if maternal responsiveness influenced the emotional expressivity of their children. A lower EES score indicates that the respondents are more expressive, while a higher EES score means that the participants are more suppressive. Data in Table 10 showed that the mean EES scores of those in perceived acceptance were 41.91 ± 4.74 (SD). EES mean score of 46.11 ± 5.19 (SD) was found in more acceptance than rejection category. Participants in the category 'signs of significant rejection' (Table 10) scored 60.43 (EES mean score) ± 5.36 (SD) and that insignificant rejection scored 61.41 (mean EES score; ± 4.78 SD). Those in perceived rejection got EES mean score of 75.78 ± 7.08 (SD), and the very serious rejection category had EES mean score of 86 ± 1.23 (SD). The p-value was 0.023 in this table. Thus, the data reject hypothesis three of "Perceived maternal responsiveness does not influence the selected Grade 10 students' emotional health."

Table 10: Relationship of Child PARQ Category and EES

Child PARQ Category	EES, Mean \pm SD	p-value
Perceived acceptance	41.91 \pm 4.74	0.023
More Acceptance than rejection	46.11 \pm 5.19	
Signs of significant rejection	60.43 \pm 5.36	
Significant rejection	61.41 \pm 4.78	
Perceived rejection	75.78 \pm 7.08	
Very serious rejection	86 \pm 1.23	

Note: Lower EES Score means expressive, higher EES Score means suppressive
A p-value less than 0.05 means significant difference in the EES Scores.

The relationship between the demographic profile of the participants and their EES was presented in Table 11. An independent t-test was used to compare demographic characteristics and EES scores and compute the p-value. Participants below 18 years old (n = 218) got mean score 49.74 (SD =13.93) and the mean score of respondents aged 18 and above (n = 32) were 47.47 (SD = 12.74). As its p-value is $0.251 > 0.05$, age has no significant difference. Male adolescents (n =107) scored 48.05 (EES mean; SD = 12.67) and females (n = 131) got 50.66 (EES mean; SD = 14.49). Those who did not specify their gender (n = 12) got 49.5 (EES mean; SD = 15.28). When the gender and EES mean scores were compared, the gender did not make a significant difference because its p-value was $0.362 > 0.05$. In short, similar to the result in Table 8, EES did not make a significant difference in ages and genders.

However, like the relationship between Child PARQ and demographic profile, the relationship of the participants with their female caregiver influenced mean scores of EES and made a significant difference (p-value = $0.012 < 0.05$). Those living with biological mothers (n = 211) were more expressive as their EES mean scores (EES mean = 45.98; SD = 5.61) were lower than those with their stepmother (n = 5; EES mean = 56.2; SD =

7.2) and other female caregivers (n = 34; EES mean = 49.85; SD = 13.71). In addition, those who lived without significant female caregiver (n = 27; EES mean = 52.33; SD = 15.78) were more suppressive emotionally than those who live with significant female caregiver (n = 223; EES mean = 47.14; SD = 13.51). Moreover, the EES score was influenced by the number of years residing with significant female caregivers (Table 11) and showed a significant difference (p-value=0.008<0.05). Those who have lived for 5 years or less than 5 years with their significant female caregiver (n=29; length=0 to 5 years) score 52.10 (EES mean; SD =8.98). Those who have lived with their significant female caregiver less than 10 years (n=5; length = 6 to 10 years) get 49.19 (EES mean; SD=7.71). Those who have lived with their female significant female caregiver for more than 10 years (n=216) have 47.20 (EES mean; SD=7.89). It means that respondents having lived with their significant female caregiver more than 10 years were the most emotionally expressive among three groups that compare the numbers of years living with significant female caregiver (0 to 5 years, 6 to 10 years, and more than 10 years). Then, those in the first group (0 to 5 years) were the most emotionally suppressive among the three groups.

Table 11: Demographic Profile and EES

Characteristics	n	Mean EES	SD	p-value
Age				
Below 18yo	218	49.74	13.93	0.251
18yo and above	32	47.72	12.74	
Gender				
Male	107	48.05	12.67	0.362
Female	131	50.66	14.49	
Unspecified	12	49.5	15.28	
Relationship of female caregiver				
Biological Mother	211	45.98	5.61	0.012
Stepmother and Father	5	56.2	7.2	
Others	34	49.85	13.71	
Residing with significant female caregiver				
No	27	52.33	15.78	0.031
Yes	223	47.14	13.51	
Numbers of years residing with significant female caregiver				
0 to 5 years	29	52.10	8.98	0.008
6 to 10 years	5	49.19	7.71	
more than 10 years	216	47.20	7.89	

Note: p-value <0.05 means significant difference

Note: Independent t-test, ANOVA

The current study reveals that there are no significant differences in the adolescents' emotional expressiveness in terms of age and gender. However, results reveal that the relationship of female caregivers (biological mother, stepmother, and other female caregivers) and the presence of co-residing female caregivers influenced the mean EES scores (see Table 11). The result shows that those residing with their significant female caregiver are more emotionally expressive than those living without significant female caregivers. Based on the findings of the study, to seek more emotional expressiveness for their emotional health, the adolescents need to reside with a significant female caregiver, especially their biological mothers. Consequently, the demographic

information shows that majority of (84%) the participants in the target area are generally emotionally expressive and are living with their biological mother (See Table 11).

Related to adolescents' emotional expressiveness, a study conducted in South Korea with 982 students found gender differences in expressing positive and negative emotions in their social interaction with strangers (Kim, You, and Know 2020, 1576-78). Regarding this difference, the authors state that their study found gender differences in adolescents' emotional expressiveness because the male students seemed not to show their negative emotional expression pattern when interacting with strangers (Kim, You, and Know 2020, 1579).

Another study in southern Ontario presented gender differences in expressing negative emotion while there is no gender difference in showing positive emotion when they interact with their mothers and friends (Lougheed et. al. 2016, 967). Moreover, female adolescents experienced less maternal supportiveness than male youth (Lougheed et. al. 2016, 968-69). Regarding this finding, the authors suggest that there is gender difference because female adolescents are more mature to regulate their emotions than males (Lougheed et. al. 2016, 971). It means that the study conducted in southern Ontario found gender idfferences in terms of expressing negative emotion and showing maternal supportiveness level.

Two related studies (Kim, You, and Know 2020; Lougheed et. al. 2016) found a significant difference by comparing the participants' genders. However, the current study highlighted the importance of the relationship of female caregivers and the presence of significant caregivers more than care-receivers. First, the different results can possibly be because of cultural differences. Korea and the Philippines have different reasons for

suppressing their negative emotions. According to the study of Kim, You, and Know, Koreans perceive tears as a weak trait in Korean culture, so men control their sad emotions to prove their power (Kim, You, and Know 2020). This culture influences parenting. Parents tend to discipline boys to hide their tears while allowing girls to cry. Thus, if boys cry, parents commonly say, “Men do not cry. Stop it!” This culture might influence male adolescents to control their emotions not to show their sadness or fear.

In the case of the Philippines, Filipinos tend to express positive emotions more than negative emotions to prevent conflicts because they value smooth interpersonal relationships, not because they perceive tears as a weakness as Koreans do. Thus, there may be a gender difference in the Korean study while the current research finds no significant gender difference.

Second, the different results may come from different age groups. Two previous studies and the current research did their research with adolescent participants. However, the Korean study was conducted with age 12 to 15 (grade 7 to 9) youth while in the current study, the sample is generally 15 years old adolescents. However, the study in Ontario was done with 16 to 17 years old youth. Adolescents (age 11 to 15) can do logical, systematic, inductive thinking and acknowledges the idea of abstract thoughts (Piaget 1929, 55-60; DeHart, Sroufe, and Cooper 2004, 468; Atwater 1996, 106-7; Richards 1983, 115). While early adolescents operate dualistic thinking (right or wrong options), the middle adolescents demonstrate multiple thinking processes that allow them to find different and various answers (Atwater 1996, 114-15). Thus, the maturity difference may be the reason for gender difference.

Two related studies (Kim, You, and Know 2020; Lougheed et. al. 2016) showed that gender was the variable of self-expressiveness. However, the current study reflected that the relationship of female caregivers (biological mother, stepmother and father, and others) and the presence of co-residing female caregivers influenced the mean EES scores (see Table 11). Lower EES scores indicate higher expressiveness, while higher EES scores imply higher suppression. The participants residing with their biological mother are more expressive than those with stepmother and father and others because they scored lower EES than the rest two groups (see Table 11).

When it comes to emotional expressiveness, there is no significant difference in terms of age and gender. However, results from the current study reveal significant differences in terms of relationship with residing female parent/caregiver, between those residing and not residing with a significant female caregiver, and the length of co-residing years with a significant female caregiver. Those residing with their biological mothers are the most emotionally expressive followed by those residing with a significant female caregiver. The differences between the findings of the current study and two related previous studies (Kim, You, and Know 2020; Lougheed et. al. 2016) in terms of age and gender can be attributed to cultural factors.

The result of the current study consistently supports the significance of parental responsiveness to increase the adolescents' emotional health and mature behaviors throughout adolescence and adult life (Gardner and Zimmer-Gembeck 2018, 2; Giaouzi and Giovazolias 2015, 3176; Rohner 2016, 11; Rohner, Khaleque, and Cournoyer 2005b, 313; Limanta 2019, 26). Perceived responsiveness (acceptance and rejection) in different cultural and social contexts influences an individual's emotional health and behavioral

issues (Rohner 2021, 33-34; Rohner 2016, 16-17; Rohner, Khaleque, and Cournoyer 2005b, 308-09). Positive maternal responsiveness increased the committed compliance of the difficult temperament (Kochanska and Kim 2013, 324; 327-30). Adolescents express their emotion and improve their psychological adjustment when they receive warm, responsive, supportive responsiveness from their parents (Rohner 2016, 21; Balan et al. 2017, 41-43; Sultana and Khaleque 2016, 48-49; 124-25; Van der Giessen and Bögels 2018, 337; Keizer, Helmerhorst, and Gelderen 2019, 1212-13; Kim, You, and Know 2020, 1578). Also, an intimate parent-child relationship formed by positive responsiveness can help express the child's genuine emotion (Colmer, Rutherford, and Murphy 2011, 18-19). Positive, accepting parenting also contributed to the development of positive personality, self-esteem, and problem-solving skills (Rohner 2016, 10-11; Rohner, Khaleque, and Cournoyer 2005b, 312; Ramírez-Uclés et al. 2018, 1340-41; Kakihara et al. 2010, 1449-50; DeHart, Sroufe, and Cooper 2004, 510). The socio-cultural theory also supports the importance of a good quality relationship with parents for children's emotional health and prosocial skills (Greener 2003, 41; Kakihara et al. 2010, 1449-50; Keizer, Helmerhorst, and Gelderen 2019, 1211-12).

Emotional expressiveness is a manifestation of a person's emotional health. Table 9 presented the proportional relationship between Child PARQ scores and EES. The respondents who chose "almost always true" in warmth/affection items are more expressive (correlation = 0.79; p-value = 0.021) in their emotions. However, the respondents tend to be more suppressive in their emotion when the respondents selected "almost always true" in items in rejection continuums (Hostility/Aggression,

Indifference/Neglect, and Undifferentiated rejection). Overall relationships of Child PARQ and EES showed high positive relationships (correlation = 0.76; p-value = 0.011).

Parental positive responsiveness (acceptance) is related to the youth's emotional expressiveness that influences their emotional health. Many studies support the parenting styles influence on youth's emotional expressiveness and their behaviors (Baumrind 1966; Hughes et al. 2005; Kochanska, Aksan, and Carlson 2005; Patrick et al. 2005; Boyatzis 2006; Bornsheuer, Garza, and Nichter 2012; Cummings et al. 2013; Sengsavang and Krettenauer 2015; Louie, Oh, and Lau 2013, 430). Filipino parents are strict and exercise high control and demands over their children (Darling, Cumsille, and Alampay 2005, 51-53). Furthermore, Filipino mothers are more progressive than Filipino fathers and allow their children to be independent (Alampay and Jocson 2012, 7). Filipino's parenting styles and the maternal attribute may make their children feel inattentive to their needs. However, more keen observation and interview is necessary to define why respondents felt some level of rejection while overall PARQ scores indicate maternal acceptance. Nevertheless, Filipino culture values intimate family relationships (Cruz, Laguna, and Mejia-Raymundo 2001, 11). Also, the current study found a proportional correlation between PARQ and EES (see Table 10). Thus, it may be safe to conclude that the youth in the target area generally receive warm, affective acceptance from their mothers and are more emotionally expressive.

Many studies support the importance of positive parenting for adolescents' emotional expressiveness and health. Balan and his co-researchers state that negative, inconsistent parenting causes adolescents to suppress their emotions and increase their emotional distress (Balan et al. 2017, 43-44). Jaureguizar and his colleagues emphasized

the importance of family because they found positive, loving parenting enhances adolescents' emotional wellbeing (Jaureguizar et al. 2018, 9). Eui Kyung Kim and co-researchers found that the adolescents' positive self-expression in their family helps them develop their cognitive empathy, increasing their emotional expressiveness and prosocial responses to strangers (Kim, You, and Know 2020, 1578). It is the positive emotion-socialization cycle: if parents show a warm, caring attitude to their adolescent children, they can build positive parent-child relationships and empathy for each other. Based on this loving tie, they can support their children to learn how to deal with negative emotions and express them in socially acceptable ways. In this course, the youth can feel stable and regulate their emotions and behaviors. As a result, they can form prosocial strategies. In short, the positive emotion-socialization cycle represents how positive parental acceptance is helpful for the youth to be emotionally healthy.

Moreover, the emotionally expressive family climate is an important factor to strengthen the youth's emotional health because their self-expressiveness is related to their prosocial behaviors and emotional health (Kim, You, and Know 2020, 1573). Keizer, Helmerhorst, and Gelderen found that good parent-child relationship increase the adolescent child's self-esteem (Keizer, Helmerhorst, and Gelderen 2019, 1212-13). Frances discovered that the youth could adjust psychologically well when mothers showed them acceptance and discipline them after explaining the reason for their punishment (Frances 2006, 96). In addition, Gardner and Zimmer-Gembeck found that adolescents could lessen their depression and anxiety traits when they received supportive parenting. Thus, they state that supportive parenting contributes to adolescents' emotional health (Gardner and Zimmer-Gembeck 2018, 11). Like IPARTheory, all these

scholars affirm that warm, responsive, and supportive parenting helps adolescents develop their emotional expressivity and interpersonal competence for their psychological adjustment (Kim, You, and Know 2020; Keizer, Helmerhorst, and Gelderen 2019; Frances 2006; Gardner and Zimmer-Gembeck 2018; Rohner 2016, 21). These findings highlight the benefit of positive parenting and emphasize the worth of parental acceptance. Moreover, those positive findings can be the reasonable foundation to infer the positive emotional state of the participants in the current study. Most of them lived with their biological mothers (84.4%) and perceived maternal acceptance (87.2%). Considering the positive influence of parental acceptance on the youth's emotional health, the current study results may suggest that the respondents in the target area are emotionally healthy and have more chances to increase their prosocial strategies and psychological adjustment.

In contrast, inconsistent, hostile, aggressive parenting causes the adolescents' emotional suppression and distress (Balan et al. 2017, 43). Also, unsupportive, punitive parental responses towards their children's emotions and devaluing the child's concerns cause negative emotions such as anger and sadness and causes children to be non-copers (Sanders et al. 2015, 410; Eisenberg, Cumberland, and Spinrad 1998, 12-13; 33-34). The youth need to develop their positive emotional expressiveness through a positive, supportive family climate where they can get proper nurture regarding socially acceptable emotional expressiveness and reduce problematic internet use (Pășărelu and Dobrea 2018, 107; Kim, You, and Know 2020, 1578-79; Sanders et al. 2015, 412; Eisenber, Cumberland, and Spinrad 1998, 10-13, 19-23, 28-31).

When parents practice acceptance and discipline youth with a logical explanation, youth demonstrate psychological adjustment, lower rejection sensitivity, and less level of social anxiety (Frances 2006, 96; Gardner and Zimmer-Gembeck 2018, 2; Giaouzi and Giovazolias 2015, 3177, 1426-27; Khaleque and Ali 2017, 450). However, the youth in negative family climate tend to avoid seeking parental support though they need positive parental reactions (such as warmth and affirmation) for their healthy emotional expression (Hunter et al. 2011, 430; Oppenheimer et al. 2016, 1274; Eisenberg, Cumberland, and Spinrad 1998, 23-31). Parental rejection leads to a cold parent-child relationship in their adulthood, negative influence on God's image, and emotion regulation (Giaouzi and Giovazolias 2015, 3177; Limanta 2019, 123-4; Rohner and Lansford 2017, 433-34).

The result (see Figure 13 and Table 10) showed the correlation between the Child PARQ category and EES. Those who perceived acceptance are more likely to express their emotion than those who perceived rejection. Specifically, 125 respondents in the 'perceived acceptance' showed lower EES scores than the rest of the categories, especially 'very serious rejection' (EES mean = 86; SD \pm 1.23). It means that those in the perceived acceptance category are more expressive than those in the other categories. Even within the acceptance categories, the result showed the differences. If the respondents were included in the lower degree of acceptance (from perceived acceptance to significant rejection), they also reported different expressive levels. Thus, respondents in significant rejection scored higher EES mean than those in the perceived acceptance category (see Table 10). It indicates that respondents who fall in the significant rejection category suppress their emotions more than those in the perceived acceptance category.

If the adolescents perceive a higher level of acceptance, they tend to be more expressive. However, if they sensed the lower degree of acceptance, they might choose to be more suppressive. It might indicate that when mothers' response is more accepting, the children are more emotionally expressive because they could expect their mothers to be more accepting of their emotions. The adolescents' emotional expressiveness forms a proportional relationship with their prosocial behaviors (Kim, You, and Know 2020, 1573). They can learn more skills to deal with their negative emotion in order to boost their emotional health when the maternal response they receive is positive, insightful, and accepting than the paternal coaching (Hunter et al. 2011, 436). Thus, maternal acceptance is important to increase the adolescents' emotional expressiveness and prosocial skills to have empathic and positive interactions in socially acceptable ways. The result of the current study (see Tables 9 and 10) also found the significant influence of positive maternal acceptance on adolescents' emotional health. Moreover, those who live with their biological mothers could perceive a higher degree of acceptance and report a higher level of emotional expressiveness (see Tables 8 and 11).

Parental rejections are subjectively perceived as sets of actions that demand a cultural understanding of the concept of rejection (Rohner 2016, 6). IPARTheory's sociocultural systems model and subtheory explains that parental responsiveness can be interpreted differently in different cultures, but the interpersonal acceptance-rejection can influence psychological adjustment and behavior issues in common (Rohner 2021, 33-34; Rohner 2016, 16-17; Rohner, Khaleque, and Cournoyer 2005b, 308-09). Thus, perceived acceptance and rejection are important information to study the parental responsive styles in diverse cultures as parents and their children interpret parents' actions differently

according to their culture and social system (Rohner and Lansford 2017, 431; Rohner, Khaleque, and Cournoyer 2005b, 308-09; Lansford et al. 2010, 2; 11).

The data result was divided into two groups by age: one group includes respondents whose ages were 18 years old below and the other age 18 years old and above (Table 12). When they were compared to identify the difference between gender and PARQ and between gender and EES by ages, male respondents in 18 years old below scored 47.04 (PARQ mean; SD = 9.47) and female respondents in 18 years old below got 48.60 (PARQ mean; SD = 9.96). It showed no significant difference in result as its p-value was 0.2499. Male respondents in 18 years old and above scored 49.78 (PARQ mean; SD = 7.29) and female respondents got 49.38 (PARQ mean; SD = 5.86). In this comparison, there was no significant difference as its p-value was 0.885. It means that gender difference in age 18 below participants did not influence the perceived maternal responsiveness.

Concerning EES scores, male respondents in age group 18 years below got 48.04 (EES mean; SD = 12.80) and female respondents in the same age group scored 51.08 (EES mean; SD = 14.66). It showed no significant difference as its p-value was 0.114 (Table 12). In age group 18 years old and above, male respondents got 48.11 (EES mean; SD = 11.85) and female respondents scored 48.43 (EES mean; SD = 13.65). It also showed that there was no significant difference in emotional expressives as its p-value was 0.948. It means that gender difference in age 18 years old and above did not influence the emotional expressive level.

Table 12: PARQ and EES by Age and Gender

Age & Sex	PARQ			EES		
	Mean	SD	p-value	Mean	SD	p-value
Below 18 yo						
Male	47.04	9.47	0.2499	48.04	12.80	0.114
Female	48.60	9.96		51.08	14.66	
18 yo and above						
Male	49.78	7.29	0.885	48.11	11.85	0.948
Female	49.38	5.86		48.43	13.65	

Note: p-value <0.05 means significant difference

The result in Table 12 indicates that the age and gender difference showed no significant difference in the PARQ and EED. However, as discussed earlier with Table 8 and 11, the current study found that there is a significant difference in the PARQ and EES of students in terms of length of residing with female caregivers. Those who reside more than 10 years scored lower PARQ mean scores and EES mean scores (Table 8 and 11). It means that participants perceived a higher level of maternal acceptance and were emotionally more expressive when they have resided with their significant female caregiver for more than 10 years. It might suggest that there is more interaction between the significant female caregivers (commonly biological mothers) and the children when they live together. Then they would have more opportunities to perceive maternal acceptance and feel comfortable expressing their emotions. Thus, the length of residing with female caregivers influenced respondents to perceive a higher level of maternal acceptance and emotional expressiveness. This finding is consistent with many scholars' claims affirming the advantage of strong parent-child attachment and parental acceptance to help children and adolescents express their genuine emotion and increase emotion regulation and socialization skills (Colmer, Rutherford, and Murphy 2011, 18-19; Greener 2003, 42-46; Hunter et al. 2011, 437; Miranda et al. 2016, 1359).

Summary

The result of this research presented that the respondents' relationships with their female caregivers can vary their perceived maternal acceptance. In this study, age and gender did not make a significant difference with Child PARQ and EES. The perceived maternal acceptance is a positive interrelated factor of the adolescents' emotional expressiveness. Also, the biological mother is a positive figure that enhances the adolescents' emotional expressiveness for their emotional health. Consistent with previous literature, those who perceived positive maternal acceptance were more expressive emotionally than those who perceived maternal rejection. And generally, the participants of this study perceived maternal acceptance than rejection and are expressive, which implies their emotional health.

CHAPTER V

SUMMARY OF FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

In this chapter, the researcher will summarize the current study and present the conclusion of the study. The following are the recommendations for future studies and implementations to enhance the adolescents' emotional health, based on the findings of the current study.

Summary of Findings

Adolescence is the transitional period from childhood to adulthood, hence it is very crucial that they experience warm, positive, and supportive parenting for their holistic development. However, social changes such as the upsurge of female-headed households, the growing numbers of births born by unmarried mothers, and the increase of female Overseas Filipino Workers imply that there would be more children growing up with one parent present than children from the past era. Therefore, Filipino youths today would have to deal with more developmental challenges as parental guidance and discipline become weakened due to parental absenteeism and single-parent household. All these issues have greatly affected the development of adolescents, not to mention children in general. In addition to the mentioned issues, the COVID-19 pandemic causes adolescents to suffer from psychological distress symptoms and struggle with pandemic-related problems. In this chaotic context, the researcher initiates the current study to

investigate how maternal responsiveness can influence the emotional health, particularly emotional expressiveness, of adolescents in an attempt to help lessen their emotional burden and improve their emotional health.

The purpose of this research is to examine whether or not maternal responsiveness influence emotional health perceived by Grade 10 students in Cupang, Antipolo City in the Philippines. To answer this research problem, the researcher developed the three sub-questions: 1) What are the demographic characteristics of the selected adolescents of Cupang, Antipolo City in the Philippines in terms of Age, Gender, Relationship pf resident female parent/caregiver, and Number of years residing with a significant caregiver?, 2) Do the mothers of Grade 10 students in Cupang, Antipolo City in the Philippines demonstrate either acceptance or rejection as measured by CHILD PARQ: Mother (Short Form)?, and 3) Does the perceived maternal responsiveness, as measured by selected Grade 10 students, influence their emotional health?

The research design of the current study is quantitative descriptive to investigate the predominant maternal responsiveness in the target area and to discover the relationship between the perceived maternal responsiveness and the youth's emotional expressiveness by using descriptive and inferential statistics. The data collection was conducted with 250 Grade 10 students (107 males, 131 females, and 12 students with unspecified gender). The respondents were from the same school in Antipolo and were fifteen years old (mean 15.96).

To answer these questions, the researcher utilized Rohner's short form of Parental Acceptance-Rejection Questionnaire (PARQ) and Emotional Expressiveness Scale (EES) as the research instruments. The researcher did a pilot test with ten Grade 10 students

from another school and edited the format of online survey forms. The data from the pilot test was not included in the data presented because the pilot test was just to make sure that the survey questions are comprehensible and that the researcher would be able to get responses to answer the research questions. For the actual research, two research assistants assigned by the target school principal sent 648 consent and assent form to the Grade 10 students and their parents. The researcher was able to collect responses from the 250 students both online (79 students) and offline (171 students). The reason why the majority of the students responded offline was because of their limited internet access.

The collected data were analyzed through descriptive and inferential statistics. Furthermore, the researcher interpreted the statistical data with reference to the related literature in Chapter 2. The researcher discovered the following findings:

First, with regards to the demographic characteristics of the participants: The researcher collected the demographic characteristics of the participants such as their age, gender, the relationship of their resident female parent/caregiver, and the number of years residing with a significant caregiver. Among the 250 adolescents, 107 are male, 131 are female, and twelve did not specify their gender; 211 of them live with their biological mothers, five live with their stepmother, and 34 live with other female caregivers; and 223 live with a significant female caregiver while 27 do not. Moreover, they reported that they had lived with their significant female caregivers for fifteen years. It means that the majority of the respondents lived and interacted with their significant female caregiver (usually their biological mothers) as most of them are 15 years old.

Second, regarding the demographic characteristics and PARQ and EES Scores: In the current study, the age and gender of the participants did not influence both the PARQ

and EES scores. However, the participants of the current study showed that both PARQ and EES scores were influenced by their relationship with their residing female caregivers. The participants who live with their biological mother marked lower PARQ scores than those who live with their stepmothers and other female caregivers. This means that the respondents of the current survey perceived the mothers/female caregivers of the target area demonstrated either acceptance or rejection. Furthermore, those who lived with their biological mothers perceived a higher level of maternal acceptance from their mothers than those who lived with their stepmothers and other female caregivers. As for the demographic on the number of years residing with a significant female caregiver, results show that there is no significant difference in the PARQ score but there is a significant difference in the EES score. On this aspect, participants who reside with a significant female caregiver are more emotionally expressive than those who do not reside with a significant female caregiver.

Third, about the perceived predominant maternal responsiveness in the target area: The data of the current study showed that 217 out of the 250 participants perceived the maternal acceptance with four different levels of acceptance such as: 'perceived acceptance,' 'more acceptance than rejection, but not qualified acceptance,' 'signs of significant rejection,' and 'significant rejection, but not more overall rejection than acceptance.' Out of the 250 respondents, 33 students reported perceived maternal rejection with varying degrees ('perceived rejection-serious rejection' and 'very serious rejection'). However, no participants perceived 'profound rejection' in the current study. Based on the data result related to PARQ scores, maternal acceptance is the perceived predominant maternal responsive style in the target area.

Though most of the respondents generally perceived ‘maternal acceptance,’ more than half of the respondents marked one item in the Indifference/Neglect dimension and another item in undifferentiated rejection. It means that the adolescents perceived that they had experienced unsupportive or unwanted responsiveness from their mothers/female caregivers. However, it might suggest that those unsupportive, not accepting interactions did not influence their general perception of maternal acceptance.

Fourth, concerning the perceived emotional health of the adolescent respondents: Those who lived with the biological mothers scored lower in the EES than those who lived with their stepmothers and other female caregivers such as aunts and grandmothers (Table 11). It indicates that those living with the biological mothers are more emotionally expressive than those who live with their stepmothers and other female caregivers. It might suggest that the relationship of the significant caregivers influences the level of the adolescents’ emotional expressiveness which implies they are more emotionally healthy.

Last, as for the influence of perceived maternal responsiveness on the adolescents’ emotional health: According to the result of the current study, the relationship between the Child PARQ in the four dimensions such as warmth/affection, indifference/neglect, hostility/aggression, undifferentiated rejection, and EES showed the positive or negative correlation (Table 9). Furthermore, the researcher compared the Child PARQ categories with EES scores. The two Child PARQ categories are acceptance category consisting of ‘perceived acceptance,’ ‘more acceptance than rejection,’ ‘signs of significant rejection,’ ‘significant rejection,’ and rejection category consisting of ‘perceived rejection’ and ‘very serious rejection.’ The researcher found a significant difference between the Child

PARQ category and EES (Table 10). The result showed that the respondents who perceived maternal acceptance had lower EES scores than those who perceived maternal rejection. It indicates that those who perceived maternal acceptance were emotionally more expressive than those who perceived maternal rejection. Based on the data result and statistical treatment, the researcher interpreted that the perceived maternal responsiveness influenced the adolescents' emotional expressiveness levels. It might suggest that the perceived maternal acceptance enhances the adolescents' emotional health.

Conclusions

The research question of the current study is "How does maternal responsiveness influence emotional health perceived by Grade 10 students in Cupang, Antipolo City in the Philippines?" From the participants' responses to the sub-research questions, it is concluded that there is a correlation between the mothers' responsiveness and the Grade 10 students' emotional expressiveness. To validate the conclusion to the main research question, the researcher explored the following sub-research questions and presents the conclusions as follows:

First, the researcher found that among demographic profiles, the respondents living with their significant female caregivers perceived a higher level of maternal acceptance and were emotionally expressive. For example, there is no significant difference in the PARQ and EES scores between the male and female participants as well as in the age differences. In other words, there is no contrast in how the male and female, as well as older and younger adolescents, perceive maternal responsiveness and their personal emotional expressiveness. However, there is a significant difference in the

PARQ and EES scores between those residing with and those not residing with their biological mothers. Those residing with their biological mothers perceive maternal responsiveness as more acceptance and they are more emotionally expressive as compared to those residing with stepmothers and other female caregivers. When it comes to those residing and not residing with a significant female caregiver, there is no significant difference in the way both groups perceive maternal responsiveness (PARQ score) but in terms of perceived personal emotional expressiveness (EES score), those residing with a significant female caregiver are more emotionally expressive as compared to those not residing with a significant female caregiver.

Second, the findings support that the participants of the current study perceived that acceptance was the prevalent maternal responsiveness styles in Cuapng Antipolo City. According to the result of the current study, 217 (86.8%) of the 250 participants of the current study perceived that the mothers of Cupang, Antipolo City in the Philippines generally demonstrated maternal acceptance with some unsupportive, not accepting episodes in the respondents' life.

Third, the Child PARQ showed the correlation with EES scores indicating that the perceived maternal acceptance increased the adolescents' emotional expressiveness.

The current research together with the body of the related literature affirms the important influence of the perceived maternal acceptance on adolescents' emotional health. The findings of the current study emphasized the importance of family environment encouraging children, specifically the adolescents as the focus of this study, to live with their biological mothers in order to perceive their maternal responsiveness as acceptance and increase their emotional expressiveness to help promote emotional health.

Recommendations

This research investigates the relationship between maternal responsiveness styles and a child's emotional health. The findings of the current study presented the significant relationship between perceived maternal responsiveness and adolescents' emotional health centering on their emotional expressiveness.

In the current study, the findings affirm that the perceived maternal responsiveness and residing with the biological mothers are significant elements to ensure the adolescents' emotional health as the respondents who live with their biological mothers since birth perceive their maternal responsiveness as acceptance. However, the result of the current study data revealed that there were 33 youths who reported maternal rejection, 39 students do not live with their biological mothers, and 27 respondents do not live with their significant caregivers. Thus, the researcher has recommendations to the following sectors to promote the emotional health of adolescents in the target area and enlarge the network that will be helpful for promoting the emotional development of the adolescents:

First, for School Teachers: Teachers can extend their focus beyond academics and the classrooms. The researcher recommends school teachers to be concerned about the emotional wellbeing of the students and investigate how their primary caregivers at home, particularly their parents, are responding to them as this will greatly affect their academic performance and motivation to learn. This will also encourage school teachers to take the initiative to compensate for the emotional needs of the students in cases where the students do not experience parental acceptance at home. This recommendation corresponds to the Theory of Human Motivation by Abraham Maslow, who introduced

the Hierarchy of Needs, emphasizing the gratification of needs. In this theory, a gratified need motivates humans to want other needs more (Maslow 1943, 394). In his hierarchy of needs, the most basic is the physiological needs such as food, clothing, shelter, sleep, and air. When the percentages of these physiological satisfactions are relatively increased, a new need will be emerged the second higher-level need to feel safe and secure and then move on to aim for the third need level to feel belonging to a family and community of friends (Maslow 1943, 376-77, 389; McLead 2018, 1-6). The satisfaction of these levels will motivate him or her to aim for the satisfaction of the fourth higher need level to develop self-esteem such as building confidence, desiring to achieve, and earning the respect of others. Finally, after all the mentioned need levels are relatively gratified, the self-actualization is emerged as the new need. Maslow defined that self-actualization means “the desire for self-fulfillment, namely, to the tendency for him to become actualized in what he is potentially” (Maslow 1943, 383). It means that individuals are motivated to actualize their potential when their other needs are relatively satisfied. Thus, McLead views that school teachers can guide their students more effectively to pursue their cognitive potential for their self-actualization if school teachers help their students be gratified their several needs in school context (McLeod 2018, 12). If school teachers care for their students’ emotional health, they can contribute to motivate their students to pursue academic potentials and enhance their students’ academic performance.

Second, for School Guidance Counselors: If school guidance counselors know how to approach students who do not experience parental acceptance at home, they can help their students to express their emotions, to help them process and navigate their emotions, and to empower them so that they will be able to cope with their real situations

at home. Furthermore, this study can encourage the school guidance counselors to think about the kind of intervention program to promote the emotional wellbeing of the students, especially for those who are not residing with their biological mothers and those who are not residing with any significant female caregivers. The programs may aim to provide the adolescents with a youth-friendly environment where they can have the venue and space for their emotional development (Roehlkepartain 2015, 1; Rohner 2021, 19).

Third, for the Church: If pastors and volunteers acknowledge the needs of youths who do not live with their biological mothers, they can help adolescents experience holistic care at the church through nonparent Christian mentors and ministers. Thus, they can empower nonparent Christians to reach out to the adolescents and to disciple them, leading them to find their identity in Christ and security in God as well as in the spiritual family that is the church. Furthermore, the church can train parents in their church and community regarding their parental responsibilities and encourage them to faithfully fulfill them by advocating the significant influence of parental acceptance on their children's emotional health (Greener 2003, 44). Finally, they can offer a 'marriage and parenting program' that can train both parents and soon-to-marry young adults to be accepting supportive parents.

Fourth, for the Community: Social Workers who work with youth can advocate how perceived maternal responsiveness influences the adolescents' emotional health in their community. The result from the study of Păsărelu and Dobrea entitled "An Investigation of Mediators for the Relationship between Parent Mental Health and Adolescent Problematic Internet Use: A Cross-Sectional Study In Romanian Adolescents" claims that parental depressive symptoms and social anxiety influence the youth

emotional problems and problematic internet use (Păsărelu and Dobrea 2018, 104-05). Thus, this study can propose to the social workers to conduct parenting training and programs to help the parents maintain emotional health that will have a positive effect on their children's emotional wellbeing. Furthermore, the social workers can reach out to more mothers to participate in these programs and activities and empower them to practice warm, supportive acceptance to their children in the Filipino setting according to their cultural concept of acceptance. Lastly, the social workers can help parents learn how to supervise the internet use of their teenage sons and daughters and protect them from the risky online environment for their holistic development.

Fifth, for Government: The current study found that residing with the biological mother was the significant factor that influences the adolescents' emotional health. However, the number of female-headed households has increased (Figure 4) and more children are born to unwed or single mothers in the Philippines (Figure 5). These changes might be related to the increase of female OFWs (Figure 6). As mothers are responsible for family finance as a household head, they seem to find that being OFWs might be one of their options to support their family though they cannot be with their sons and daughters physically. Thus, the current study may help the government acknowledge the importance of young people co-residing with their biological mothers and its impact on their emotional health. It can suggest to the government to increase working opportunities for the female-headed family so that mothers can work and live with their children without the need of working in a foreign country.

Sixth, for the Private Companies: The findings of the current study may propose to the private companies to support the strengthening of the parent-child relationship as

part of care for their employees' welfare. Thus, they can make policies for their employees to have a work schedule that can allow the parents to spend time with their children. In addition, they can develop company programs that support the strengthening of family relationships like family day events, family talent shows, etc. Moreover, they can provide in-house day-care centers for employees with young children so that the parents can visit their children in the day-care center during their breaks as well as go to and from work together with their young children and not have to leave their children at home with other adults.

Seventh, for parents: The findings of the current study suggest the need of the parenting curriculum focusing on youth's emotional health. Parents may acknowledge the importance of responsive and positive parental acceptance to increase youth's emotional health. Moreover, they may learn practical strategies to improve the youth's emotional well-being and resilience. A curriculum has been designed and appended for this purpose (Appendices R and S). Practitioners from church, schools, and community with professional knowledge and experiences in the fields of Early Childhood Education, BS/AB Psychology, BA/MA in Family Life and Child Development can conduct seminars for mothers.

Last, for the Future Research: The current study investigated the relationship between the perceived maternal responsiveness of the Grade 10 students in Cupang, Antipolo City in the Philippines and their emotional health. The researcher recommends the following future studies on the parental responsiveness and its influence on the emotional health of the different age groups for the sake of strengthening the parent-child relationship and the children's emotional well-being:

1. Perceived Maternal Responsiveness on the Emotional Health of School-Age Children and Young Single Adults.

Since the current study focuses on the influence of perceived maternal responsiveness focusing on the Grade 10 students, such study can also be replicated on younger adolescents such as the grades 7, 8, and 9, as well as the school-age children, and young single adults.

2. Perceived Paternal Responsiveness on the Emotional Health of School-Age Children, Adolescents and Single Adults

The researcher recommends a future study that investigates paternal responsiveness and its influence on children's emotional health. This study will help those working with children and youth to think about what actions will be helpful for the children of different age groups who do not live with their biological mothers or who do not experience warm maternal acceptance.

3. Other Mediating Factors That Contribute to the Youth's and Children's Emotional Health.

The researcher recommends a future study to discover other mediating factors that can contribute to increasing the youth's and children's emotional health. It is with the interest of the researcher to find out from this recommended future research what mediating factors can help children and youth compensate for the lack of parental acceptance at home.

4. Parental Responsiveness on the Socio-Emotional Skills (Social Skills, Emotional Regulation, etc.)

The researcher recommends a future study on how parental responsiveness can help children develop their socio-emotional skills so that they can express their true emotions in socially acceptable ways.

5. Study on the reason why Filipino Grade 10 students perceived maternal rejection in terms of attention in Indifference/Neglect dimension of IPARTheory but overall perceived acceptance.

The researcher recommends a future study that conducts interviews and observation to investigate why Grade 10 students in Cupang, Antipolo City perceived some level of rejection related to maternal attention while they generally perceived maternal acceptance.

The researcher recommends school teachers, school guidance counselors, pastors and volunteers of church, social workers of the community, governments, private companies, parents, and researchers collaborate to enhance emotional health of Filipino youth and empower parents to interact with their sons and daughters with responsive, positive, warm acceptance.

APPENDIX A

Demographic Information of Child English Version

Questionnaires

I am Yun, Ae-Sun, PhD student of Asia-Pacific Theological Seminary (APNTS).

As part of the fulfillment of my PhD degree in Holistic Child Development, I am conducting dissertation research and writing my dissertation. I am conducting surveys to measure the predominant mother's responsiveness in this community and to determine your mother's influence on your emotional health. Your response will be a great help to my study. It can also contribute to understanding the emotional health of children in this community. I seek your kind cooperation for this study. Thank you. God bless you.

Sincerely yours,
Yun, Ae-Sun

1. Questionnaire Sets about Demographic information of the child

Age	Gender	M / F
-----	--------	-------

1. Who is your significant female caregiver?

- Biological Mother
- Stepmother with biological father
- Stepmother without biological father
- Others (specify _____)

2. Is your significant female caregiver residing with you?

Yes No

3. How long does she live with you?

APPENDIX B

CHILD PARQ: Mother (Short Form) English Version (Rohner and Khaleque 2005, 101-02)

Name (or I.D. number)

Date

The following pages contain a number of statements describing the way mothers sometimes act toward their children. I want you to think about how each one of these fits the way your mother treats you.

Four boxes are drawn after each sentence. If the statement is *basically* true about the way your mother treats you then ask yourself, “Is it almost *always* true?” or “Is it only *sometimes* true?” If you think your mother almost always treats you that way, put an X in the box ALMOST ALWAYS TRUE; if the statement is sometimes true about the way your mother treats you then mark SOMETIMES TRUE. If you feel the statement is basically *untrue* about the way your mother treats you then ask yourself, “Is it *rarely* true?” or “Is it almost *never* true?” If it is rarely true about the way your mother treats you put an X in the box RARELY TRUE; if you feel the statement is almost never true then mark ALMOST NEVER TRUE.

Remember, there is no right or wrong answer to any statement, so be as honest as you can. Respond to each statement the way you feel your mother really is rather than the way you might like her to be. For example, if she almost always hugs and kisses you when you are good, you should mark the item as follows:

MY MOTHER	TRUE OF MY MOTHER		NOT TRUE OF MY MOTHER	
	<i>Almost Always True</i>	<i>Sometimes True</i>	<i>Rarely True</i>	<i>Almost Never True</i>
Hugs and kisses me when I am good	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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(Revised June 2004)

MY MOTHER		TRUE OF MY MOTHER		NOT TRUE OF MY MOTHER	
		<i>Almost Always True</i>	<i>Sometimes True</i>	<i>Rarely True</i>	<i>Almost Never True</i>
1.	Says nice things about me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Pays no attention to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Makes it easy for me to tell her things that are important to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Hits me, even when I do not deserve it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Sees me as a big nuisance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Punishes me severely when she is angry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Is too busy to answer my questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Seems to dislike me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Is really interested in what I do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Says many unkind things to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Pays no attention when I ask for help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Makes me feel wanted and needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Pays a lot of attention to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Goes out of her way to hurt my feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Forgets important things I think she should remember	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Makes me feel unloved if I misbehave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Makes me feel what I do is important	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Frightens or threatens me when I do something wrong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Cares about what I think, and likes me to talk about it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Feels other children are better than I am no matter what I do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Let me know I am not wanted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Let me know she loves me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Pay no attention to me as long as I do nothing to bother her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Treat me gently and with kindness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPENDIX C

The Emotional Expressive Scale (EES)
English Version (Kring, Smith, and Neale 1994, 938).

Please mark the box that describes your emotional expressive pattern the most among six options: Never true, Untrue, Somewhat untrue, Somewhat true, True, or Always true. Please give your answers on the basis of your child's behavior over the last six months or this school year.

	Never true	Untrue	Somewhat untrue	Somewhat true	True	Always true
1. I think of myself as emotionally expressive						
2. People think of me as an unemotional person						
3. I keep my feelings to myself						
4. I am often considered indifferent by others						
5. People can read my emotions.						
6. I display my emotions to other people.						
7. I don't like to let other people see how I'm feeling.						
8. I am able to cry in front of other people.						
9. Even if I am feeling very emotional, I don't let others see my feelings.						
10. Other people aren't easily able to observe what I'm feeling.						
11. I am not very emotionally expressive.						
12. Even when I'm experiencing strong feelings, I don't express them outwardly.						
13. I can't hide the way I am feeling.						
14. Other people believe me to be very emotional.						
15. I don't express my emotions to other people.						

16.The way I feel is different from how others think I feel.						
17.I hold my feelings in.						

Thank you very much for your cooperation!

APPENDIX D

Demograpikong Impormasyon ng Bata Filipino Version

Mga Palatanungan

Ako si Yun, Ae-Sun, PhD student ng Asia-Pacific Theological Seminary (APNTS). Bilang parte upang matapos ko ang aking PhD degree sa Holistic Child Development. Isinulat ko ang pag-aaral at pananaliksik na ito. Nagsagawa ako ng pananaliksik upang sukatin ang pangunahing pag tugon ng isang Ina sa komunidad na ito, at upang matukoy ang impluwesya ng iyong Ina sa iyong emosyonal na kalusugan. Ang iyong tugon ay isang malaking tulong para sa aking pag-aaral. At makakatulong ito upang maunawaan ang emosyonal na kalusugan ng bata sa komunidad na ito. Hinihiling ko ang inyong kooperasyon para sa pag-aaral na ito. Maraming salamat at pagpalain ka ng Diyos.

Gumagalang,
Yun, Ae Sun

Mga tanong tungkol sa Demograpikong impormasyon ng bata

Edad		Kasarian	L/B
1. Sino ang babaeng sa iyo ay nag-aalaga?			
<input type="checkbox"/> Tunay na Nanay <input type="checkbox"/> Stepmother at ang tunay na ama <input type="checkbox"/> Stepmother at walang tunay na ama <input type="checkbox"/> Iba pa ().			
2. Kasama mo ba sa bahay ang babaeng nag-aala sayo?			
<input type="checkbox"/> Hindi <input type="checkbox"/> Oo			
3. Ilan taon mo ng kasama ang babae na nag-aalaga sayo?			

APPENDIX E

CHILD PARQ: Mother (Short Form) Filipino Version

Ang sumusunod na mga pahina ay naglalaman ng mga pahayag na naglalarawan sa pamamaraan kung paano tratuhain ng ina ang kaniyang anak. Nais kong isipin mo kung paanong ang bawat isa sa mga ito ang siyang tumutukoy kung paano ka tratuhin ng iyong ina.

Apat na mga kahon ang pagpipilian sa bawat pangungusap. Kung ang pahayag ay totoong tungkol sa kung paano ka tratuhin ng iyong ina, tanungin ang iyong sarili kung ito ay HALOS PALAGING TOTOO o PAMINSAN-MINSAN TOTOO. Kung ang pangungusap ay hindi totoo para sa iyo, tanungin ang inyong sarili kung ang pahayag ay PAMBIHIRANG TOTOO o HALOS HINDI TOTOO. Lagyan ng **X** ang kahon na sagot mo.

Tandaan, walang tama o maling sagot sa anumang pahayag kaya maging matapat sa iyong sa pagsagot. Sagutin ang bawat pahayag kung paano ka tratuhin ng iyong ina sa halip na sa paraang gusto mo siya maging. Halimbawa, kung palagi ka niyang niyayakap at hinahalikan kapag ikaw ay nakagagawa ng mabuti, markahan ang kahon ayon sa sumusunod na nga antas:

Aking Ina	Totoo sa aking ina		Hindi totoo sa aking ina	
	<i>Laging totoo</i>	<i>Minsan totoo</i>	<i>Hindi totoo</i>	<i>Ni minsan hindi naging totoo</i>
Niyayakap at hinahalika ako kapag may nagawa akong mabuti	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Aking Ina		Totoo sa aking ina		Hindi totoo sa aking ina	
		<i>Laging totoo</i>	<i>Minsan totoo</i>	<i>Hindi totoo</i>	<i>Ni minsan hindi naging totoo</i>
1.	Nagsasabi ng mabubuting bagay tungkol sa akin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Hindi ako binibigyan ng atensyon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Ginagawang madali para sa akin na sabihin sa kanya ang mga bagay na mahalaga sa akin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Pinapalo ako kahit di naman dapat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Nakikita ako bilang isang malaking pangulo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Pinaparusahan ako ng malala kapag siya ay galit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Walang oras sagutin ang aking mga katanungan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Parang di ako gusto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Interesado sa ginagawa ko	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Maraming di magandang sinsabi tungkol sa akin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Walang oras pagkailangan ko ng tulong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Palagin niyang pinaparamdam na kailangan at gusto ako	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Maraming oras sa akin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Lumalayo upang saktan ang aking damdamin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Kinalilimutan ang mga mahahalagang bagay na sa palagay ko na dapat niyang Malala	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Pinaparamdam niyang di niya ako mahal kapag ako ay may nagawang kalokohan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Pianparamdam sa akin na importante ang aking ginagawa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Tinatakot o pinagbabantaan pag may nagawa akong mali	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Nag-aalala tungkol sa iniisip ko, at gusto niyang pag-usapan ito	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Iniisip na mas magaling ang ibang bata sa akin kahit anong gawin ko	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21.	Laging pinapadama na ako ay gusto niya	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Laging pinapadama na mahal ako	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Walang pakialam sa akin hanggat wala akong ginagawa na nakababahala	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Tintrato ako ng mahusay at ng may kabaitan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPENDIX F

The Emotional Expressive Scale (EES) Filipino Version

Mangyaring markahan ang kahon na naglalarawan ng iyong emosyonal na nagpapahayag na pattern sa pinakamarami sa anim na pagpipilian: Hindi kailanman totoo, hindi Totoo, Medyo hindi totoo, Medyo totoo, Totoo, o Laging totoo.

	Hindi Totoo	Hindi Totoo	Medyo hindi totoo	Medyo totoo	Totoo	Laging totoo.
1 Iniisip ko ang aking sarili bilang emosyonal na mapagpapahayag						
2. Iniisip ng mga tao sa akin bilang isang di emsyonal na tao						
3. Itinatago ko sa aking sarili ang aking damdamin						
4. Madalas akong itinuturing na walang malasakit sa iba						
5. Mababasa ng mga tao ang aking emosyon						
6. Ipinakita ko ang aking emosyon sa ibang tao.						
7. Ayokong ipaalam sa ibang tao kung ano ang nararamdaman ko.						
8. Nagagawa kong umiyak sa harap ng ibang tao.						
9. Kahit na ako ay sobrang emosyonal ko, hindi ko hinahayaang makita ng iba ang aking nararamdaman.						
10. Ang ibang mga tao ay hindi madaling makita ang naramdaman ko.						
11. Hindi ako masyadong emosyonal na nagpapahayag.						
12. Kahit na nakakaranas ako ng malakas na damdamin, hindi ko ipinapahayag ang mga ito sa panlabas.						
13. Hindi ko maitago ang nararamdaman ko.						
14. Ang ibang tao ay naniniwala sa akin na napaka-emosyonal.						
15. Hindi ko ipinapahayag ang aking damdamin sa ibang tao.						
16. Ang kakaibang pakiramdam ko ay naiiba sa kung ano ang iniisip ng iba.						
17. Nakokontrol ko ang aking emosyon						

APPENDIX G

Institutional Review Board Approval



Asia-Pacific Nazarene Theological Seminary
Ortigas Avenue Extension, Kaytikling
Taytay 1920, Rizal, Philippines

NOTIFICATION OF REVIEW APPROVAL

May 6, 2021

Yun, Ae-Sun

ae-sun.yun@apnts.edu.ph

Protocol Title: THE INFLUENCE OF MATERNAL RESPONSIVENESS ON EMOTIONAL HEALTH AS PERCEIVED BY GRADE 10 STUDENTS IN CUPANG, ANTIPOLO CITY IN THE PHILIPPINES

Protocol#: AR-010

IRB Review Date: May 6, 2021

Effective Date: May 6, 2021

Expiration Date: May 6, 2022

Review Type: Exempt Review

Review Action: Approved

The IRB made the following determinations:

- Waivers: Waiver of informed consent documentation
- Other Documentations: All necessary attachments submitted
- Risk Determination: No greater than minimal risk

Please contact me at npetallar@apnts.edu.ph if you have any questions.

Sincerely,

Dr. Nativity A. Petallar
Associate Dean for PhD Studies
Asia-Pacific Nazarene Theological Seminary

APPENDIX H

Letter To The Principal Of Cupang National High School

Dear

Cupang National High School

Greetings in the name of Jesus!

I am Yun, Ae-Sun, PhD student of Asia-Pacific Theological Seminary (APNTS).

As part of the fulfillment of my PhD degree, I need to do the surveys to measure the perceived mother's responsiveness in Cupang and to figure out its influence on Child's emotional health. The following is the title of my research: **THE INFLUENCE OF MATERNAL RESPONSIVENESS ON EMOTIONAL HEALTH AS PERCEIVED BY GRADE 10 STUDENTS IN CUPANG, ANTIPOLLO CITY IN THE PHILIPPINES.**

I look forward to identifying the state of emotional health in Antipollo City and make particular benefits to the following sectors:

- School: Teachers and guidance counselors can identify the needs of their students and offer meaningful activities for their healthy emotional development.
- Community: Social Workers can advocate the importance of parenting for the child's emotional health and develop appropriate intervention seeking the enhanced quality of the child's emotional health in the Filipino setting.
- Church: Pastors and volunteers can function as mediating factors to enhance the child's emotional health. They can support each family to ensure the child's emotional health.

- Government: This research can contribute to establishing laws and programs to empower child-related workers to deal with the child's emotions and equip parents to conduct positive parenting to their children.

In line with the research purpose and significance, I request you to allow me to conduct surveys in your school. Thank you.

Sincerely yours,

Researcher

APPENDIX I

Letter Of Approval From The Principal

Name of PRINCIPAL:

Date:

I have been told and understood the description of the doctoral dissertation research project of Yun, Ae-Sun and have had the opportunity to ask and receive answers to any questions I have regarding the research and the use of the information to be gathered.

I allow the researcher to conduct surveys through Google Classroom platforms and agree with the understanding that the information of this study will be used in the doctoral dissertation.

Signature of the Principal

APPENDIX J

Assent Form For Parents For Pilot Test

Name of participant:

Date:

I have been told and understood the description of the doctoral dissertation research project of Yun, Ae-Sun and have had the opportunity to ask and receive answers to any questions I have regarding the research and the use of the information to be gathered. And I have been informed that my child will participate in the pilot test of this research by responding to the surveys through Google Classroom platforms.

I am willing to allow my child to participate in answering online surveys and agree with the understanding that the information of this study will be used in the doctoral dissertation.

Signature of the Participant

APPENDIX K

Informed Consent Form

1. Research Title: THE INFLUENCE OF MATERNAL RESPONSIVENESS ON EMOTIONAL HEALTH AS PERCEIVED BY GRADE 10 STUDENTS IN CUPANG, ANTIPOLO CITY IN THE PHILIPPINES.
2. Research Purpose: To measure the predominant mother's responsiveness style in Cupang and to figure out its influences on Child's emotional health.

To contribute to the discovery of an influence of mothers' responsiveness tendency on youth's emotional health.
3. Surveys Content: You will choose the perceived responsiveness of your mother and your emotional expressing behaviors. The following is the content of surveys:
 - 1) To identify perceived maternal responsiveness pattern
 - 2) To identify the youth's emotional expressiveness
4. Survey Modes, Time Duration, and Benefits:

The researcher will manage the participant's response by being faithful to confidentiality policy and using the result only for this research purpose.

The participant can join the surveys through Google Classroom and will take around ___ minutes to complete them.
5. How to participate in the research:
 - 1) Please sign the consent and assent forms that show your voluntary participation.
 - 2) Please respond to surveys once the researcher releases them through Google Classroom.
6. For more information: You may approach the researcher and the research assistant if you have any questions regarding this research.

Statement of Consent:

I understand the procedures described above. My questions have been answered to my satisfaction, and I agree to participate in this study.

I understand that I will respond to the surveys through Google Classroom.

I understand that the result will be kept in a secure location by the researcher.

Participant's Signature

Date

Participant's Printed Name

Research Assistant's Signature

Date

Research Assistant's Printed Name

APPENDIX L

Consent Form for Child Participation

Name of participant:

Date:

I have been told and understood the description of the doctoral dissertation research project of Yun, Ae-Sun and have had the opportunity to ask and receive answers to any questions I have regarding the research and the use of the information to be gathered. And I have been informed that my child will participate in this research by responding to the surveys through Google Classroom platforms.

I am willing to allow my child to participate in answering online surveys and agree with the understanding that the information of this study will be used in the doctoral dissertation.

Signature of the Participant

APPENDIX M

Assent Form For Parents

Name of participant:

Date:

I have been told and understood the description of the doctoral dissertation research project of Yun, Ae-Sun and have had the opportunity to ask and receive answers to any questions I have regarding the research and the use of the information to be gathered. And I have been informed that I will participate in this research by responding to the surveys through Google Classroom platforms.

I am willing to participate in answering online surveys and agree with the understanding that the information of this study will be used in the doctoral dissertation.

Signature of the Participant

APPENDIX N

Assent Form for Participants Below 18 Years Old

Dear _____

My name is Yun, Ae-Sun and I am a student of Asia-Pacific Nazarene Theological Seminary (APNTS). As a part of the requirements of my PhD in Holistic Child Development, I am currently preparing to do research for my dissertation on the topic, “THE INFLUENCE OF MATERNAL RESPONSIVENESS ON EMOTIONAL HEALTH AS PERCEIVED BY GRADE 10 STUDENTS IN CUPANG, ANTIPOLO CITY IN THE PHILIPPINES.” The purpose of this study is to identify the influence on a child’s emotional health, especially emotional expressiveness.

If you agree to participate, I will ask your teacher to open Google Meet through Google Classroom and send you the link for the surveys. Your teacher will be with you during your survey so that you can ask him/her any questions about the surveys. You will answer your mother’s parenting and your emotional expressiveness styles. It will take around 20 minutes to complete all the surveys.

I will use your responses only for this research purpose. I assure you that I will not play/show any part of the recording to anyone and will not state your name in this study. If you would like additional information concerning this study before or after it is complete, please feel free to contact me through your teacher. He or she will be the one to communicate with me. A small token of gratitude will be given for your participation.

I have read this Consent and Authorization Form. I have had the opportunity to ask, and I have received answers to any questions I had regarding the study. I understand that if I have any additional questions about my rights as a research participant, I may send a message to Yun, Ae-Sun through this email address myamy79@gmail.com or messenger Aesun Yun.

Participant's Name: _____

Date: _____

APPENDIX O**AGREEMENT TO MAINTAIN CONFIDENTIALITY**

Translator

I _____ agree to maintain the confidentiality of all information about any of the subjects if I am hired to translate for the observations/interviews of children/staff engaged in by Yun, Ae-Sun, of Asia Pacific Nazarene Theological Seminary (Rizal, Philippines). I understand that I may not discuss the contents of surveys and their results with anyone except Yun, Ae-Sun and that I may not make reference to the names, identity, or circumstances of any of the individuals with whom I come in contact through this project. This is to protect the rights of vulnerable children, youth and staff. Finally, I understand that if I violate this agreement of confidentiality it may effect payment for my services as a translator.

I understand the above conditions on this project, and I agree to these conditions without reservation.

Signed: _____ Date: _____ (Translator)

Signed: _____ Date: _____ (Researcher)

Signed: _____ Date: _____ (Witness)

APPENDIX P**AGREEMENT TO MAINTAIN CONFIDENTIALITY**

Research Assistant

I _____ agree to maintain the confidentiality of all information about any of the subjects if I am hired to assist for the observations/interviews of children/staff engaged in by Yun, Ae-Sun, of Asia Pacific Nazarene Theological Seminary (Rizal, Philippines). I understand that I may not discuss the contents of surveys and their results with anyone except Yun, Ae-Sun and that I may not make reference to the names, identity, or circumstances of any of the individuals with who I come in contact through this project. This is to protect the rights of vulnerable children, youth and staff. Finally, I understand that if I violate this agreement of confidentiality it may effect payment for my services as a research assistant.

I understand the above conditions on this project, and I agree to these conditions without reservation.

Signed: _____ Date: _____ (Research Assistant)

Signed: _____ Date: _____ (Researcher)

Signed: _____ Date: _____ (Witness)

APPENDIX Q**AGREEMENT TO MAINTAIN CONFIDENTIALITY**

Statistician

I _____ agree to maintain the confidentiality of all information about any of the subjects if I treat statistically the collected data of Yun, Ae-Sun, of Asia Pacific Nazarene Theological Seminary (Rizal, Philippines). I understand that I may not discuss the contents of surveys and their results with anyone except Yun, Ae-Sun. This is to protect the rights of vulnerable children, youth and staff. Finally, I understand that if I violate this agreement of confidentiality it may effect payment for my services as a statistician.

I understand the above conditions on this project, and I agree to these conditions without reservation.

Signed: _____ Date: _____ (Statistician)

Signed: _____ Date: _____ (Researcher)

Signed: _____ Date: _____ (Witness)

APPENDIX R

RECOMMENDED CURRICULUM IN ENGLISH

Profile of Target Learners

The target group of learners for this curriculum is Filipino mothers with teenage children. They may be married or single mothers who are 25 years old and above. They are fluent in the Filipino language but can also understand and speak English. This curriculum caters to Filipino mothers who possess literacy skills of reading and writing from any occupation.

This curriculum can be facilitated by pastors, ministers, school teachers, and social workers who are knowledgeable and with expertise in human development across the life span. It is ideal that the facilitators are female so that it will be more convenient for the participants to share and to identify with their facilitators. However, this curriculum is not limited to female facilitators as it may be necessary to invite male facilitators due to lack of manpower or other reasons.

The ideal number of participants is five so that it will be more comfortable for the mothers to share their thoughts and experiences within the set time frame. If the participants are more than five mothers per session, they can be grouped into small groups of five to implement the activities.

Background of the Curriculum

Parents positively influence youth development, including emotional development and positive self-concept, and reduce adolescents' risky behaviors (Beckmeyer, Su-Russell, and Russell 2020, 101-02; Cruz, Laguna, and Mejia-Raymundo

2001, 12-14; Laboviti 2015, 171). However, in the Philippines, three social paradigms: modernization, urbanization, and industrialization, reduce the family influence on the individual, allow more permissive norms and behaviors, and cause the breakdown of the function as the family (Medina 2001, 273-75). These phenomena may cause the possibility of decreasing the parent-youth interaction period and parental influence on the youth (Cruz, Laguna, and Mejia-Raymundo 2001, 1). Also, the pandemic since 2020 has caused several challenges to families. Thus, mothers may tend to overlook and be unresponsive to the emotional needs of their children, particularly during the crucial stage of adolescence. When adolescents do not have avenue to release their emotions, there is big tendency for them to experience psychological distress.

Psychological distress symptoms refer to negative emotions such as feeling hopeless, restless, gloomy, useless, nervous, and sorrowful (Twenge et al. 2019, 187). Since the COVID-19 pandemic became active in the Philippines in January 2020, Filipinos have experienced those symptoms because of COVID-19 infection or death in the family and quarantine (Tee et al. 2020, 380). Worse is that the moderate to mild depressive symptoms (feeling lonely, insomnia, feeling depressed, etc.) and suicidal thoughts have increased among youth (Puyat et al. 2021, 3; 6). According to research conducted with 2,037 participants from March 28 to April 12, 2020, single respondents aged 12 to 21.4 experienced stress, anxiety, moderate to severe depression, and isolation more than other age groups (Tee et al. 2020, 380, 388). Unfortunately, the numbers of mental healthcare and professionals are insufficient, so people with psychological symptoms cannot access appropriate treatment (Lally, Tully, and Samaniego 2019, 63-64).

Rohner states that “parental love is the single most important factor in a child’s life” (Rohner 2021, 3). Thus, his theory generally emphasizes the cross-cultural significant role of the parental responsiveness in the childhood and lifespan influence on individuals’ psychological adjustment in their society. It is obvious that parental influence is getting weaker on older youth than younger adolescents (Miranda et al. 2016, 1353-54; Khaleque 2017, 978; Khaleque 2014, 1420; Khaleque and Ali 2017, 442). However, parental responsiveness is significant to various issues related to youth’s emotional health. Especially, maternal responsiveness significantly matters in the Filipino context. Perceived paternal rejection increase seven times higher psychological maladjustment of Filipino children and youth at ages eight to 18 and perceived maternal rejection shows 13 times higher than paternal influence (Diaz 2020). Thus, this curriculum is designed to enhance the understanding of the children. Moreover, it will advocate the needs of Filipino teenage children and importance of responsive mothering for their emotional health. Finally, it hopes to see mothers demonstrating maternal responsiveness after completing this curriculum.

Time Frame of the Curriculum

This curriculum consists of ten sessions of two hours each. It can be implemented any time of the year.

Location Site

It is the intention of this curriculum to be implemented in an urban setting. It can be a seminar for mothers in a church, a school, or a community setting. This curriculum is available for both on-site and online platforms.

For on-site platform, it is best to conduct in a conference room with tables and chairs good for six people (one facilitator and five members). It is optional for the facilitator to use a laptop. The activity sheets for each session and ballpens or pencils must be ready on-site.

For online platform, the facilitator and all the participants must have their own gadgets such as laptops, tablet, or mobile phones with the applications that they will use installed media like Zoom or Google Meeting. It is best that the applications they will be using can allow the facilitators to share their slides. The facilitator will send activity sheets to the participants in advance and the participants should prepare their own ballpens or pencils.

General Goals of the Curriculum

In terms of knowledge, this curriculum aims to help parents identify, describe, and explain the needs of teenage children and the importance of maternal responsiveness, particularly to their emotional health.

In terms of attitude, this curriculum aims to encourage parents to express their willingness and to choose to be more attentive and responsive to their teenage children's emotional needs.

In terms of skills, this curriculum aims to empower mothers to alter their previous manners of relating to their teenage children and to practice responsive mothering for their children's emotional health.

Specific Topics and Lesson Plans

There are the ten lesson plans using Jane Vella' Seven Steps Curriculum Model (Vella 2000). It shows the topic of each session, learning outcomes, and learning tasks. Each lesson has sample visual aids that facilitators can use as the presentation slides for the content of each topic and respective activity sheets for the different learning tasks. The facilitators can add or design their own presentation slides to introduce the contents of the topics.

Session One

Topic	Who is the child?	
Materials	Activity Sheet, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have described who a child is from the Biblical perspective.
	Attitude	At the end of the session, the participants will have demonstrated an attitude of respect toward their children as created in God's image.
	Skills	At the end of the session, the participants will have demonstrated the skills to describe a child from the Biblical perspective.
Learning Task	Inductive Task	The participants will draw a child figure on the middle part of the activity sheet and write their answer to the question "Who is the child?" on the left part of their paper. It is to give them time to reflect on their thoughts about who a child is. Please see Activity Sheet for Inductive Task and Implementation Task below.
	Input Task	The facilitator will present the Biblical perspective of a child. The sample materials are indicated below this table.
	Implementation Task	The participants will write their new thoughts about the child based on the Biblical perspective on the right part of their paper. Please see Activity Sheet for Introductory Activity and Application On-Site below. Then participants will share their previous and newly acquired thoughts to the group.
	Integration Task	The participants will show their Activity Sheet to their teenage child and discuss with them how their understanding has changed. They can also make use of this time to ask how their children are feeling and to listen to them.

Sample Visual Aids for Session One

The multi-dimensional, complex notions of children

- Fully human and made in the image of God yet also still developing and in need of instruction and guidance;
- Gifts of God and sources of joy yet also capable of selfish and sinful actions;
- Vulnerable and in need of protection yet also strong, insightful, and models of faith and endowed with gifts to serve others.

Marcia J. Bunge, "Biblical Perspectives Session" (lecture, Asia-Pacific Nazarene Theological Seminary, Taytay, July 11, 2017).

Children are...

They are spiritual being with embedded God's image, but they are more vulnerable physically, emotionally, socially than grown-up adults.

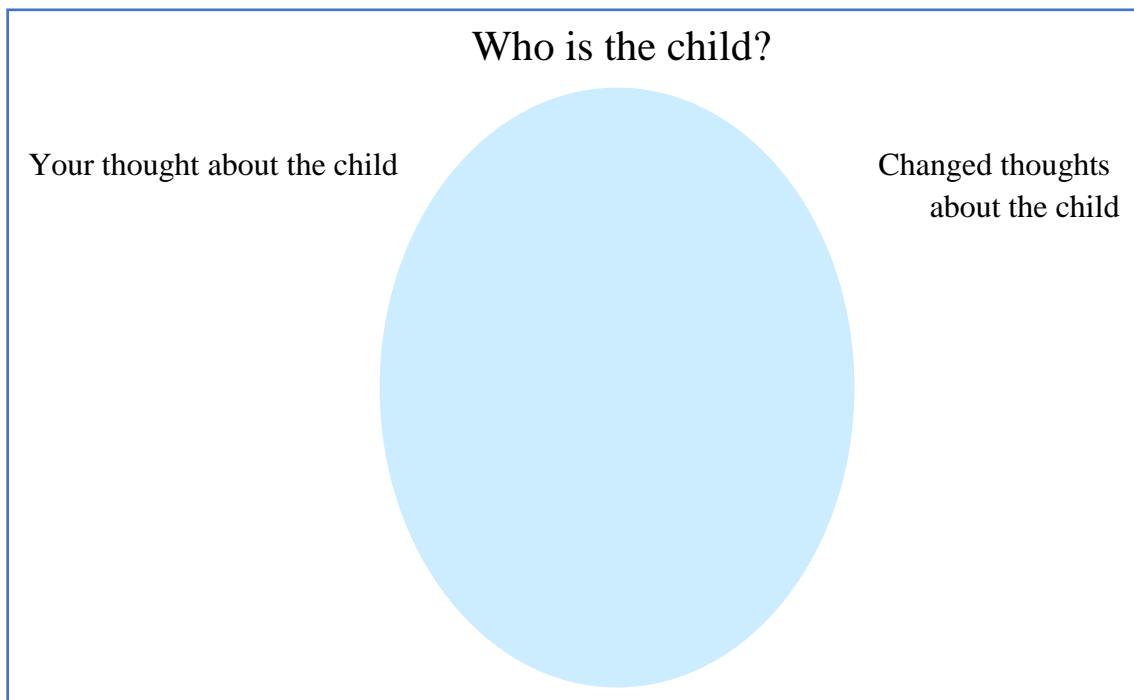
Children possess both strengths (creativity, resilience, potential, and openness) and weaknesses (immature attitude or behaviors and sinful natures).

Children in God's Image

- God created humans in his image (Gen. 1:27).
- Copsey stated that children have the knowledge of divine secrets because they are created in his image.

Kathryn Copsey, *From the Ground Up: Understanding the Spiritual World of the Child* (Oxford: The Bible Reading Fellowship, 2005), 85.

Three Presentation Slides to Answer “Who is the Child?”



An Activity Sheet for Inductive Task and Implementation Task

Session Two

Topic	Needs of Teenage Children	
Materials	Activity Sheet, ballpen or pencil	
Learning outcome	Knowledge	At the end of the session, the participants will have identified the needs of teenage children.
	Attitude	At the end of the session, the participants will have agreed to pay more attention to the needs of their teenage children.
	Skills	At the end of the session, the participants will have articulated their teenage children's needs.
Learning Task	Inductive Task	Participants will share in their group how their conversation with their teenage children went after the previous session and how their teenage children responded to them. Then participants will write the needs of teenage children on the left column of their activity sheet. Please see the Activity Sheet for Introductory Activity and Application On-Site below.
	Input Task	The facilitator will present the needs of teenage children. The sample materials are indicated below this table.
	Implementation Task	Participants will choose from the categories the two needs of their teenage children that they need to fulfill. They will write these on the middle column of the activity sheet. Please see the Activity Sheet for Introductory Activity and Application On-Site below. Then they will think of action plan what to do to fulfill their teenage children's needs and write them on the right column of the activity sheet. Please see the Activity Sheet for Inductive Task and Implementation Task below.
	Integration Task	Participants will practice their plans at home.

Sample Visual Aids for Session Two

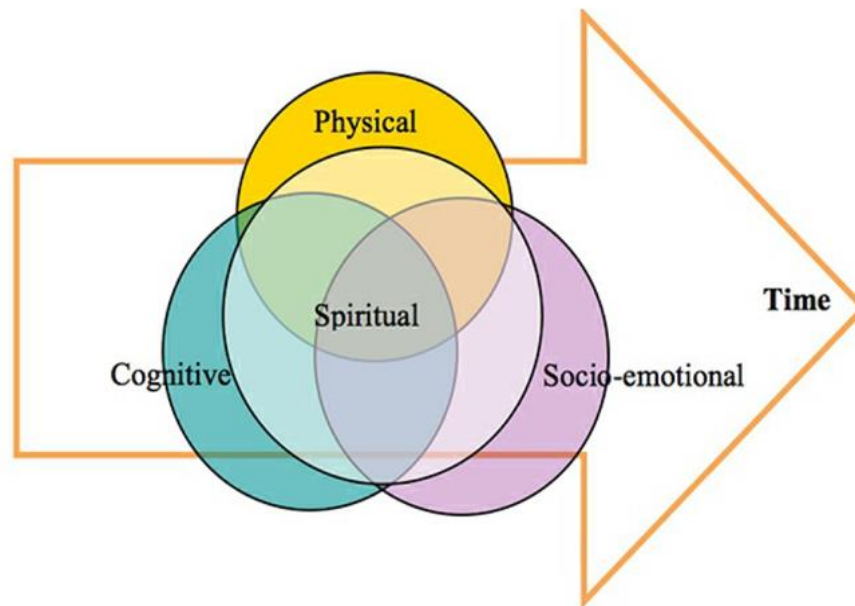
Category	Children's Needs
Physical	House, family, money, healthy, safety, structure, etc.
Emotional	Freedom of expression, attachment, emotional support, hope, etc.
Spiritual	Salvation, growth of faith, good relationship with God, moral development, discipline, hope, etc
Academic	Education, talent or potential development, etc.
Social	Friends to play together, relational, social skills, etc.

Patricia Toland and Rosemary Sabatino, "Intervention Strategies for Children in Crisis"
(lecture, Asia-Pacific Nazarene Theological Seminary, Taytay, June 13, 2016).

Impact of Spiritual Harm	How to be Healed
<p>Distorted view of self</p> <ul style="list-style-type: none"> - Low self-image - Self-contempt (Hating self) - Shame (Self-defense/Sexual exploitation) 	<p>Renewing the view of self: <u>You are Special</u></p> <p><u>Infinite worth</u>: Give them affection, affirmation, approval, being generous with sincere encouragement.</p> <p><u>Unconditional love, acceptance, and forgiveness</u> Self-hatred -> Fill with God's love</p>
<p>Distorted view of others</p> <ul style="list-style-type: none"> - Disconnection from others: Harmful self-protection (Isolation, hardness, and erecting emotional wall) - Loss of trust 	<p>Renewing the view of others: Let them know you are not alone.</p> <p>Belonging which gives safety, security, identity and significance-> Belonging to God.</p> <p>Restore trust: 1) <u>Trust appropriately</u> 2) <u>Proper boundary</u> 3) <u>Learn to trust in God</u></p>
<p>Distorted view of God</p> <ul style="list-style-type: none"> - God's existence - God's nature - Spiritual Crisis (No meaning of life: Suicide) 	<p>1) Reconciliation with their <u>Creator</u> (<u>Saving</u> relationship)</p> <p>2) Replacement of <u>lies</u> with <u>God's truth</u>.</p> <p>3) Renewing God's Image: <u>Shepherd (Seeking & Saving)</u>-> <u>Good Father</u> (John 10:11-15: His great sacrifice)</p>

Christa Foster Crawford, "From Spiritual Harm to Spiritual Healing," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (USA: CLC Publication, 2013), 161-77.

Holistic Child Development



Integral Approach for Children Flourishing (Segura-April et al. 2014, 6).

Four Es for the Balance in Nurture



- 1) **E**at the balanced meal everyday (Physical development);
- 2) **E**njoy his or her childhood (Social development);
- 3) **E**xpress the true emotion through healthy behaviors (Emotional development);
- 4) **E**nable to learn for his or her future (Academic development and spiritual formation).

Four Presentation Slides to Present the Teenage Children's Needs

Needs of Teenage Children	Two Needs of My Child	Action Plans

An Activity Sheet for Inductive Task and Implementation Task

Session Three

Topic	Responsiveness vs. Rejection I	
Materials	Activity Sheet, Filipino Version CHILD PARQ: Mother (Short Form), Filipino Version CHILD PARQ: Child (Short Form), ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have defined and explained what maternal responsiveness is.
	Attitude	At the end of the session, the participants will have demonstrated their willingness to be more responsive to their teenage children.
	Skills	At the end of the session, the participants will have practiced one responsive action to their teenage children.
Learning Task	Inductive Task	Participants will share how they have practiced their action plans at home from previous session and how their teenage children responded to them.
	Input Task	The facilitator will explain Rohner's IPAR Theory about Parental Acceptance and Parent Rejection. The sample materials are indicated below this table.
	Implementation Task	The participants will answer the Filipino Version CHILD PARQ: Mother (Short Form) as they perceive their mothering styles. They will think about two practical ways to show their responsive attitude to their teenage children. Please see the activity sheet for Implementation Task and Integration Task below.
	Integration Task	The participants will bring home the Filipino Version CHILD PARQ: Child (Short Form) and request their teenage children to answer it. It is to compare the difference between maternal perception and children's perception regarding the mothers' responsive styles. They will practice two responsive actions that they have not tried before. Please see the activity sheet for Application On-Site and Application in Real Context below.

Sample Visual Aids for Session Three

Parental Acceptance	Parental Rejection
A positive response with warm expression and empathy	A harsh, unaffectionate response or emotional unresponsiveness

(Rohner, Khaleque, and Cournoyer 2005b, 305; Rohner, Khaleque, and Cournoyer 2005a, 5-7; Hughes et al. 2005, 383).

Uniquely, youth may feel parental rejection from time to time even in happy and healthy families demonstrating parental acceptance as they subjectively perceive and interpret their interaction with their parents



(Jager et al. 2016, 2109-11; Limanta 2019, 10, 25; Rohner, K haleque, and Cournoyer 2005b, 308).

Parental Acceptance		Parental Rejection	
Parents' Emotion toward their children	Corresponding actions to their children	Parents' Emotion toward their children	Corresponding actions to their children
Warmth	Affection by physical (e.g., kiss, hug, fondle, etc.) and verbal (e.g., praise, compliment, say nice things to or about) expressions.	Hostility	Aggressive physical (e.g., hit, bite, scratch, shove, pinch, etc.) and verbal (e.g., curse, sarcasm, belittling, say thoughtless, unkind, cruel things to or about) expressions
		Indifference	Neglect (physical and psychological unavailability of parent and no attention to needs of the child)
		Undifferentiated Rejection (Child feels unloved, unappreciated, or uncared-for)	

Interpersonal Acceptance-Rejection Theory (IPARTheory) (Rohner, Khaleque, and Cournoyer 2005b, 306-07)

Three Presentation Slides to Present IPARTheory

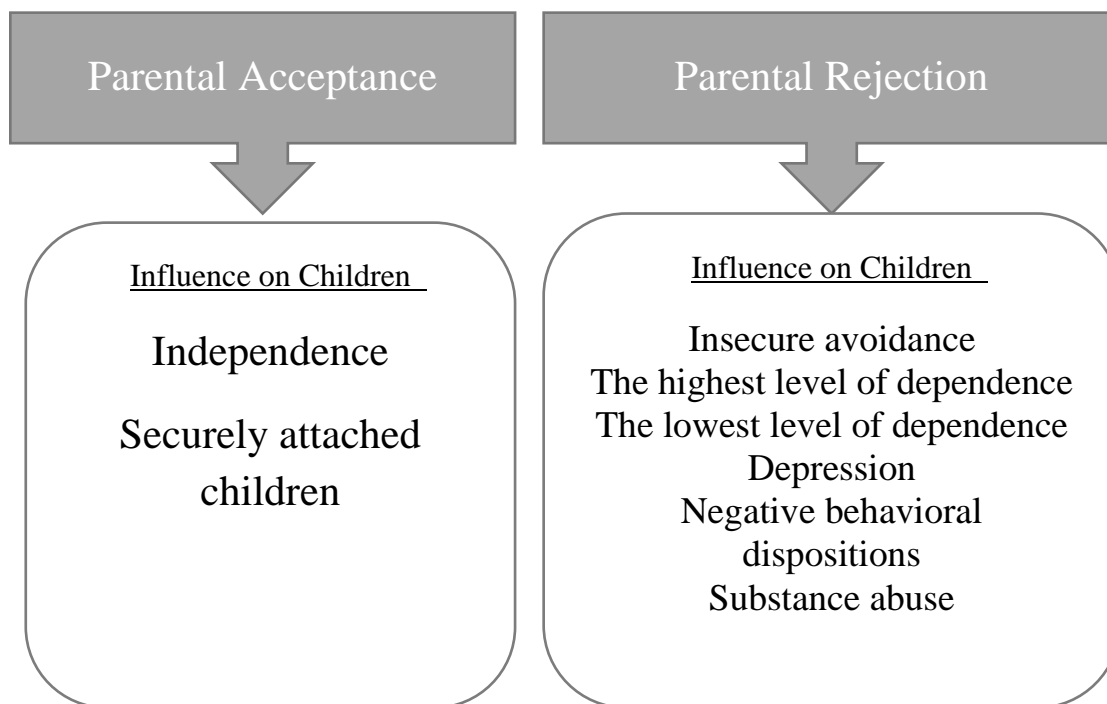
Plans to be Responsive	Actual Practice
<ul style="list-style-type: none">••	<ul style="list-style-type: none">••

An Activity Sheet for Implementation Task and Integration Task

Session Four

Topic	Responsiveness vs. Rejection II	
Materials	Activity Sheet, Filipino Version CHILD PARQ: Mother (Short Form), Filipino Version CHILD PARQ: Child (Short Form), ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have defined and explained the positive influence of responsive mothering on their teenage children.
	Attitude	At the end of the session, the participants will have demonstrated more responsive attitudes towards their teenage children.
	Skills	At the end of the session, the participants will have practiced maternal responsiveness towards their teenage children at home.
Learning Task	Inductive Task	Participants will fill up the left part of the activity sheet “I was! I will!” to reflect on their usual responsive styles. Please see the activity sheet for Inductive Task and Implementation Task below.
	Input Task	Facilitator will explain the influence of maternal responsiveness on teenage children’s emotional health.
	Implementation Task	Participants will see the result of Filipino Version CHILD PARQ: Child (Short Form) and recall their own usual responsiveness style. Then they will fill up the right part of the “I was! I will” activity sheet on how they can be more responsive towards their teenage children than in the past. Please see activity sheet for Inductive Task and Implementation Task below.
	Integration Task	Participants will practice what they wrote on their activity sheet. Then they will evaluate how successful they have practiced them at home.

Sample Visual Aids for Session Four



Summary of Impact of Parental Acceptance-Rejection on Children

Youth who perceived a higher level of maternal acceptance were more expressive.

Youth who lived with their biological mothers were more expressive and experienced a higher level of acceptance

-From the Survey conducted in Cupang in 2021-



Two Presentation Slides to Present the Influence of Maternal Acceptance on Youth's Emotional Health

I was	I will
If my child asked me to help _____, I _____.	If my child asked me to help _____, I _____.
If my child told me _____, I _____.	If my child told me _____, I _____.

An Activity Sheet “I was! I will” for Inductive Task and Implementation Task

Session Five

Topic	Positive Parenting for Emotional Expressiveness	
Materials	Activity Sheet, EES, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have defined and explained why emotional expressiveness is related to emotional health.
	Attitude	At the end of the session, the participants will have demonstrated openness to allow their children to express their emotions.
	Skills	At the end of the session, the participants will have practiced the skills to help their teenage children express their emotion in socially acceptable ways.
Learning Task	Inductive Task	Participants will get the result of their teenage children's result concerning Filipino Version CHILD PARQ: Mother (Short Form). Then they will compare the difference between their own perception and their teenage children's perception of their responsiveness.
	Input Task	The participants will learn the importance of emotional health and the significant influence of maternal responsiveness on their teenage children's emotional health.
	Implementation Task	The participants will answer the Emotional Expressive Scale (EES) about their children as they perceive their children's emotional expressiveness. They will reflect on how their teenage children express their emotion in given situations and how they respond to them by using the activity sheet for Implementation Task below.
	Integration Task	The participants will bring home the EES form and request their teenage children to answer it. It is to compare the difference between maternal perception and children's perception regarding the teenage children's emotional expressiveness.

Sample Visual Aids for Session Five

Positive Caregivers for Positive Parenting

Warmth/affection

Praise

Support

Reasoning
approach

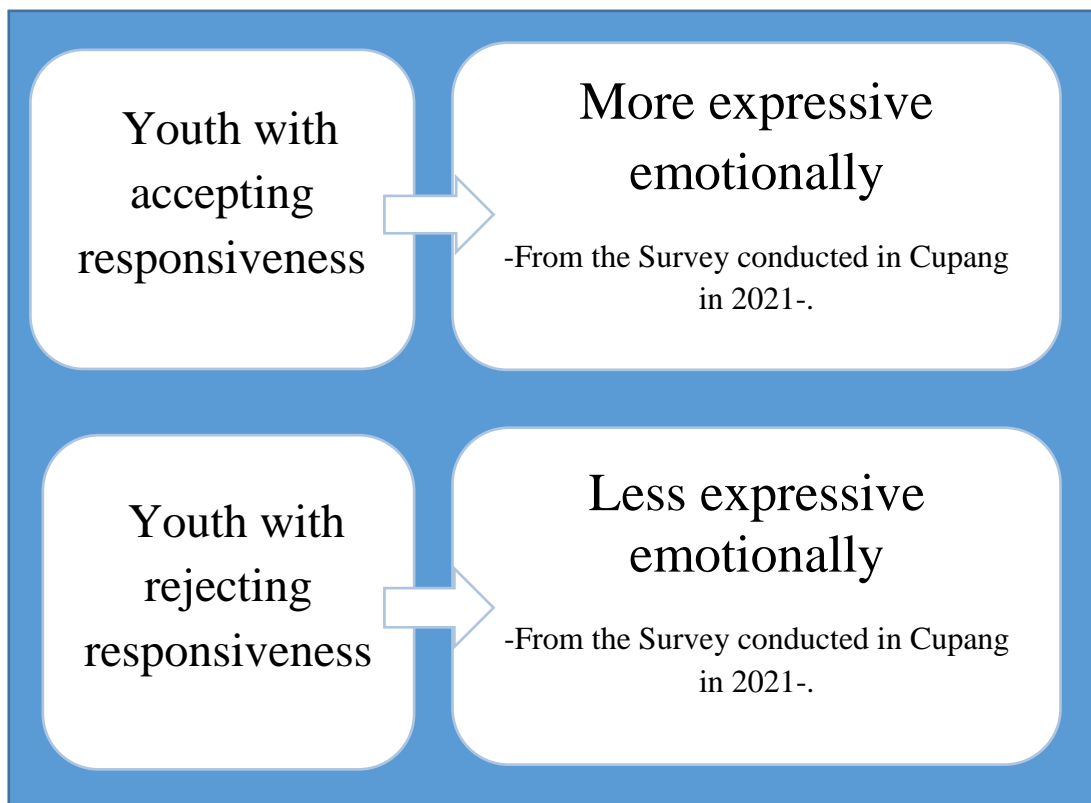
Comfort

Positive caregivers are those who perform warm, affectionate, reciprocal responsiveness. They tend to approach children with supportive, encouraging, empathic attitude under the mutually-reasoned-firm boundary (Rohner, Khaleque, Cournoyer 2005a, 5-7).

Influence of
Positive,
Accepting
parenting
on Youth
Development

Positive, accepting parenting also contributed to the development of positive personality, self-esteem, and problem-solving skills

(Rohner 2016, 10-11; Rohner, Khaleque, and Cournoyer 2005b, 312; Ramírez-Uclés et al. 2018, 1340-41; Kakihara et al. 2010, 1449-50; DeHart, Sroufe, and Cooper 2004, 510).



Three Presentation Slides to Present the Characteristics of Positive Caregivers and Influence of Maternal Acceptance on Youth's Emotional Expressiveness

When my child wants to play games though I tell him/her to stop it and sleep	When my child has conflicts with his/her friends
<p>My Child expresses</p> <p>_____ and</p> <p>(their emotion)</p> <p>_____.</p> <p>(their action)</p> <p>Then I</p> <p>_____</p> <p>_____.</p> <p>(my response to his/her emotion and actions)</p>	<p>My Child expresses</p> <p>_____ and</p> <p>(their emotion)</p> <p>_____.</p> <p>(their action)</p> <p>Then I</p> <p>_____</p> <p>_____.</p> <p>(my response to his/her emotion and actions)</p>

An Activity Sheet for Implementation Task

Session Six

Topic	Positive Parenting - Kingdom Style Mothering	
Materials	Activity Sheet, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have identified positive parenting styles.
	Attitude	At the end of the session, the participants will have demonstrated more positive and responsive attitudes toward their teenage children in their daily lives.
	Skills	At the end of the session, the participants will have practiced positive and Kingdom style mothering disciplines to their teenage children.
Learning Task	Inductive Task	Participants will share ideas on how their teenage children express their emotions and how they respond to their children based on the activity that they did in the previous session.
	Input Task	Facilitator will present the Kingdom style positive parenting in disciplining their teenage children as members of their society.
	Implementation Task	Participants will look at the illustration in their activity sheet and write their insight on it. Then they will share it with their group members and discuss how to discipline their children as members of their society. See the activity sheet for Implementation Task below.
	Integration Task	Participants will share their insight on the illustration in their activity sheet with their children and listen to the thoughts of their teenage children.

Sample Visual Aids for Session Six

Parental Discipline Through Communication

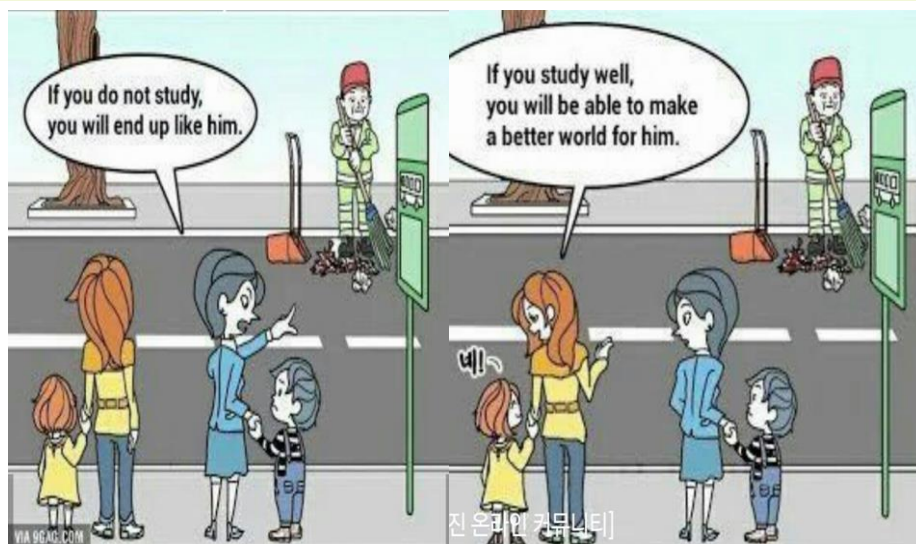
- Develop empathic communication skill to cope with their child's anger
- Recognize their needs
- Respond to their needs



Kingdom Style Parenting

- Teach our children to be diligent and to develop competence according to God's calling
- Teach them how to empathize
- Teach them to advocate Win-Win solutions and altruism, and not to focus on self-centeredness and greed.

Two Presentation Slides to Present Positive Parenting



<https://www.facebook.com/TruthInsideOfYou/photos/a.529002447165761/1226578507408148/?type=1&theater>

Q. Which mother demonstrates positive parenting?
Why do you think so?

Q. What do you want to do to discipline your teenage children as members of their society?

Q. How do your teenage children think about the illustration?

Session Seven

Topic	Gentle Discipline for Emotional Health	
Materials	Activity Sheet, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have identified and explained the gentle discipline for their teenage children and how self-control is related to teenage children's emotional health.
	Attitude	At the end of the session, the participants will have demonstrated more gentle and warm attitudes toward the needs of their teenage children's emotional health.
	Skills	At the end of the session, the participants will have practiced how to discipline their teenage children to demonstrate self-control for their emotional health.
Learning Task	Inductive Task	Participants will fill up the activity sheet regarding their usual emotion expression mechanism. Please see activity for Inductive Task below.
	Input Task	Facilitators will explain the reason for gentle discipline and self-control for teenage children's emotional health.
	Implementation Task	Participants will develop strategies on how to practice gentle discipline in emotion-provoking situations. Then they will share them with their group members. Please see an activity for Implementation Task below.
	Integration Task	Participants will discuss steps for gentle discipline with their teenage children. Please see an activity sheet for Integration Task below.

Sample Visual Aids for Session Seven

Reason for Gentle Discipline

“Fathers,
do not provoke your children to anger,
but bring them up in the discipline
and instruction of the Lord.”

(Eph. 6:4 ESV)

Reason for the Needs of Self-Control

“Whoever is slow to anger is better than
the mighty, and he who rules his spirit than
he who takes a city”

(Prov. 16:32 ESV)

Self-Control for Emotional Health

Self-Control is not the disguise of my
emotion persecuting my inner desire.
It is a training to achieve better goals by
regulating one’s emotions, thoughts, and
actions

(<https://en.wikipedia.org/wiki/Self-control>)

Discipline

- Meaning: Training in wisdom, virtue, and self-control: a disciplined person = self-controlled.
- The goal of child discipline: Training (yes, sometimes involving punishment) that empowers our children to be more self-controlled.

Robert J. Morgan, *Effective Parenting: Raising Kids in the Nurture and Instruction of the Lord*. (Paranaque: Church Strengthening Ministry, 1996), 88.

For Effective Discipline

1. The loyalty of love- the foundational way to create obedient and disciplined children is to love them with such warmth and tenderness that they'll never want to break your heart.
2. Reprimand through Words-carefully chosen, lovingly given, plainly spoken.

Robert J. Morgan, *Effective Parenting: Raising Kids in the Nurture and Instruction of the Lord*. (Paranaque: Church Strengthening Ministry, 1996), 91.

Case	My Emotion	My Reaction	My Child's Emotional Expression
1. I told my child to sleep early for tomorrow class. However, I found that he/she slept at 4am because of online games.			
2. My child's teacher did not give the final grade to my child because he/she does not complete his/her projects.			
3. My child does not want to come to church on Sunday.			

An Activity Sheet for Inductive Task

Case	My Emotion	Self-control for Gentle Discipline	Benefits of Self-control
1. I shouted to my child because he/she was late for school because of online games.			
2. I spanked my child and removed my child's phone because he/she did not complete his/her projects.			
3. I left my child at home because he/she did not want to come to church on Sunday.			

An Activity Sheet for Implementation Task

Instruction: Choose one case among given situations in your activity sheet and talk with your teenage child how he/she wants you to discipline them for their self-control. Develop steps for Gentle Discipline with your teenage child.

1) My chosen case:

2) Steps for Gentle Discipline

An Activity Sheet for Integration Task

Session Eight

Topic	Parenting of Adolescence	
Materials	Activity Sheet, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have defined “accepting love” and “transforming love” and distinguished between the two.
	Attitude	At the end of the session, the participants will have demonstrated both accepting love and transforming love to their teenage children.
	Skills	At the end of the session, the participants will have practiced maternal responsiveness according to when their teenage children need their accepting love and their transforming love.
Learning Task	Inductive Task	Participants will share with their group members on how their parenting styles have changed as their children become adolescents.
	Input Task	Facilitator will explain and differentiate between accepting love and transforming love, and how parents must shift their parenting style when their children have become adolescents.
	Implementation Task	Participants will write when they will practice accepting love and transforming love for their teenage children in the activity sheet for Implementation Task. Then they will share them with their group members.
	Integration Task	Participants will ask their teenage children when they need accepting love and transforming love and write their teenage children’s suggestions in the activity sheet for Integration Task

Sample Visual Aids for Session Eight

Accepting Love and Transforming Love

- Accepting Love: It affirms the being of the child
- Transforming Love: It seeks the well-being of the child.

Michael J. Sandel, "The Case Against Perfection: What's Wrong With Designer Children, Bionic Athletes, And Genetic Engineering," *The Atlantic Monthly* 293, no. 3 (April): 51, PMID: 15468473.

Parenting of Adolescence

We move

1. from controller to companion.
2. from talking to listening.
3. from spending time with them to spending more time with them
4. from reprimanding to reassuring, especially from dads.
5. from preaching to praying

Robert J. Morgan, *Effective Parenting: Raising Kids in the Nurture and Instruction of the Lord*. (Paranaque: Church Strengthening Ministry, 1996), 78-83.

Two Presentation Slides for Parenting of Adolescence

When to practice Accepting Love	When to practice Transforming Love
1.	1.
2.	2.
3.	3.

An Activity Sheet for Implementation Task

When does your child need your Accepting Love?	When does your child need your Transforming Love?
1.	1.
2.	2.
3.	3.

An Activity sheet for Integration Task

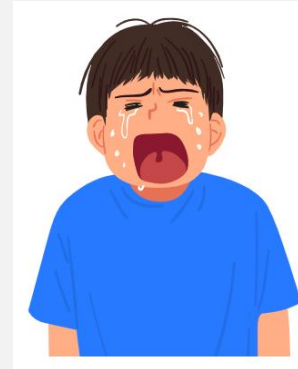
Session Nine

Topic	Child Emotional Health – Handling Grief	
Materials	Activity Sheet, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have identified and explained the five grief stages.
	Attitude	At the end of the session, the participants will have demonstrated more positive and responsive attitudes toward their teenage children’s negative emotional expression.
	Skills	At the end of the session, the participants will have practiced positive and responsive mothering disciplines to their teenage children and other children in their community.
Learning Task	Inductive Task	Participants will share their conversation with their teenage children concerning the illustration in their activity sheet.
	Input Task	Facilitators will present the grief stages and healthy grief processes to discipline their teenage children regarding emotion socialization.
	Implementation Task	Participants will develop strategies on how to be significant adults to children from broken families and to empower grieving children to be resilient. Please see activity sheet for Implementation Task.
	Integration Task	Participants will pray and practice their strategies in their real life context.

Sample Visual Aids for Session Nine

Five Stages of Grief

- Denial: Emotional Numbing
- Anger
- Bargaining (wish to let their loss to be restored.)
- Depression (void, sorrow in reality)
- Acceptance (Accepting new life)



Kim Hoover, "Children & Grief," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (Fort Washington, PA: CLC Publications, 2013), 45-46.

Healthy Grief Process

- God loves you¹⁾
- Identifying the losses
- Expressing emotions at the presence of an active listener
- Strengthening supports of people and community²⁾

1) Marjorie McDermid, "God's Pattern and Plan for Children: Valued, Accepted, Loved," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (Fort Washington, PA: CLC Publications, 2013), 31.

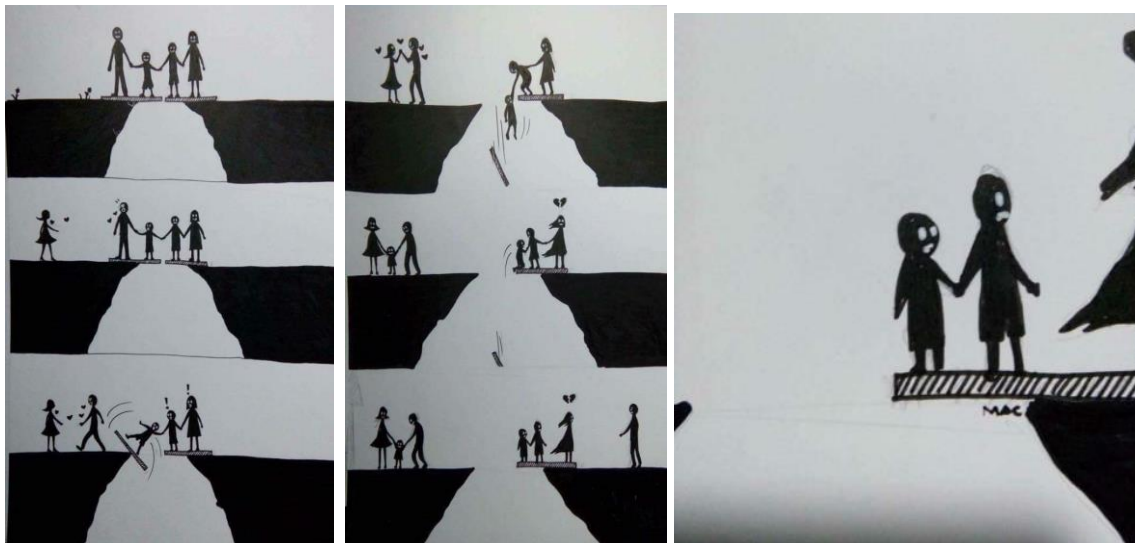
2) Kim Hoover, "Children & Grief," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (Fort Washington, PA: CLC Publications, 2013), 51.

Goot's Emotional Health:

- 1) Richness (build the empathy),
- 2) Fit (consider the consequence and search the fitting behavior to express the emotion and to get the desiring consequence), and
- 3) Control (control the act according to vision and direction of purpose).

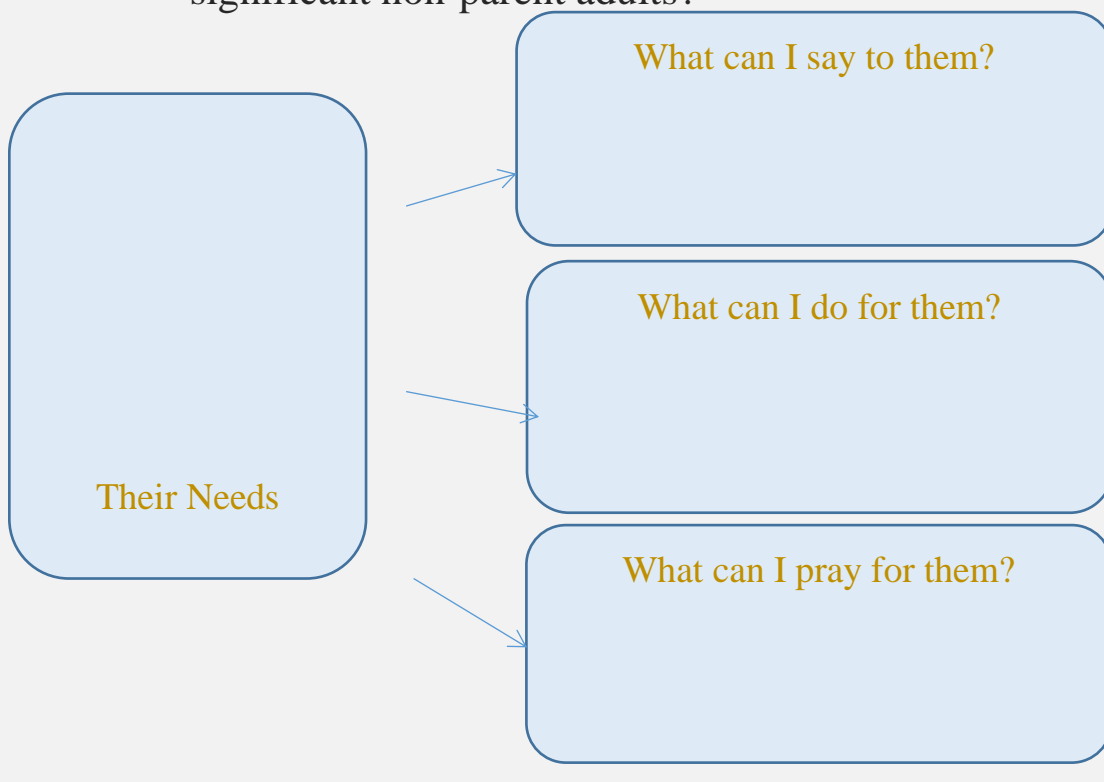
Mary Vander Goot, *Healthy Emotions: Helping Children Grow* (Grand Rapids, MI: Baker Book House Company, 1987), 27-44.

Three Presentation Slides for Emotional Socialization



May Peh, LUSTFULNESS = BROKEN FAMILY, accessed Nov. 16, 2018,
https://www.facebook.com/MayOctosiotheaPicaPeh/media_set?set=a.2430142840545951&type=1

Question: What can we do for children in the illustration as significant non-parent adults?



An Activity Sheet for Implementation Task

Session Ten

Topic	Parenting of Grieving Teenage Children	
Materials	Activity Sheet, ballpen or pencil	
Learning outcomes	Knowledge	At the end of the session, the participants will have identified and explained the parenting tasks of restoring grieving teenage children.
	Attitude	At the end of the session, the participants will have demonstrated positive and responsive attitudes toward the grieving children in their community for their emotional restoration.
	Skills	At the end of the session, the participants will have analyzed the context of grieving teenage children and will have known how to help them restore their emotional health.
Learning Task	Inductive Task	Participants will share with their group members on when their teenage children need either accepting or transforming love.
	Input Task	Facilitators will explain the relationship between trauma and emotional expressiveness.
	Implementation Task	Participants will analyze the crisis of Ukraine children that threaten their emotional health in the war. Then they will share their analysis with their group members. Please see activity sheet for Implementation Task.
	Integration Task	Participants will analyze the crisis of teenage children in their community. Please see an activity sheet for Integration Task.

Sample Visual Aids for Session Ten

	How they think	How they feel	How they express	How they interact with others
Emotionally Healthy Child	Their talk, their reaction, and their play show their thoughts. They think society can protect them.	They feel various kinds of emotion. They feel security and belonging.	They express directly and frankly.	They communicate their feeling and thoughts directly to people.
Healthy Child in War	They think they are not safe. They experience no protection of the society and the lack of trust. But they think limited sense of justice and fairness.	They feel fear from violence. They feel sorrow, distrust, and unattached because of their loss. They protest against war-related events and anger with confusion.	They express anger, sorrow, and fear.	They are still with their caregivers and trusted adults, so they can communicate from the inside or interact with others about their experiences.
A Traumatized Child with symptoms	They don't understand war and think their parents are powerless.	They feel confusion, hurt, sadness, fear and desire to protest.	They show aggressive, regressive behaviors and physical symptoms like headache and loss of appetite.	They try to communicate with others through their symptoms. Unfortunately it is usually misinterpreted.
A Traumatized Child without Symptoms	They have no family protection and security networks. They regard themselves as adults.	The feel more tired than aggressive, more competent than regressive. They also feel confusion	They express no medical complaints. They show self-sufficient attitude.	They are not able to display their true feelings, thoughts and emotions to the outside.

Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 133-43.

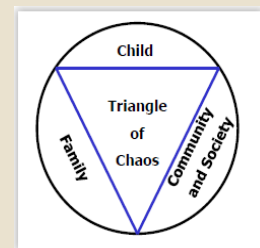
Emotional Health of Children

- Emotionally Healthy Children: They express directly and honestly.
- Healthy Child in War: They express anger, sorrow, and fear
- A Traumatized child with symptoms: They show aggressive, regressive behaviors and physical symptoms like headache and loss of appetite.
- A Traumatized child without symptoms: They express no medical complaints. They show self-sufficient attitude.

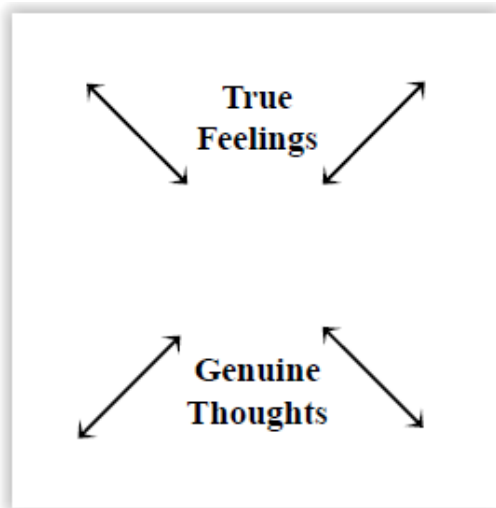
Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 133-43.

The Chaos Of Children In War.

- One side of triangle is chaos in war that they just feel confused without understanding what the war is.
- Second side of triangle is chaos in family that they feel great frustration to their parents, thinking parents are too powerless to protect them, and fear as well as anxiety about the disappearing their parents.
- Third is chaos in community and society that make them expose to total strange situation without familiar community structure.



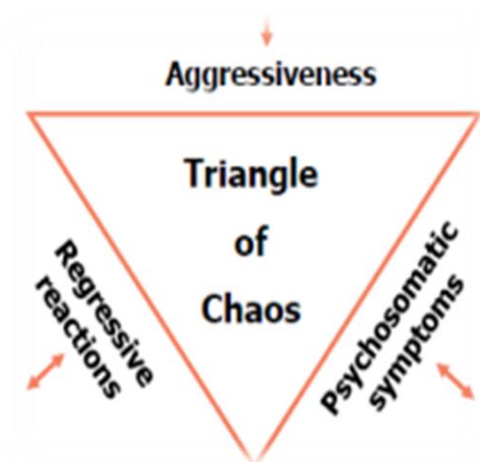
Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 139-40.



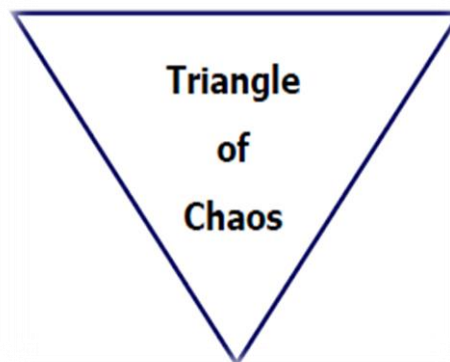
Emotionally Healthy Child



Traumatized yet Healthy



A Traumatized Child with Symptoms



A Traumatized Child without Symptoms

<Excerpt from the Textbook 'Offering Healing and Hope for Children in Crisis' of CCTI>

Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 133-43.

Three Presentation Slides for Parenting of Grieving Teenage Children

	Analysis
Children at Crisis	Ukraine Children
Their Situation	
Crisis of Ukraine Children	Articulate possible crises of Ukraine children
Expecting Type of Their Emotional Triangle	Draw one type of triangle according to your expectation
Action Plan	What can we do for them?

An Activity Sheet for Implementation Task

	Analysis
Children at Crisis	Children at crisis in your community
Their Situation	
Crisis of Ukraine Children	Articulate possible crises
Action Plan	What can we do for them? - Physically - Verbally - Spiritually

An Activity Sheet for Integration Task

APPENDIX S

RECOMMENDED CURRICULUM IN FILIPINO

Profile ng mga Target na Mag-aaral

Ang target na grupo ng mga mag-aaral para sa kurikulum na ito ay mga Pilipinong ina na may mga malabata na anak o *teenage children*. Maaaring sila ay may asawa o mga '*single mother*' na 25 taong gulang pataas. Sila ay matatas sa wikang Filipino ngunit nakakaintindi at nakakapagsalita rin ng Ingles. Ang kurikulum na ito ay tumutugon sa mga inang Pilipino na nagtataglay ng mga kasanayan sa pagbasa at pagsulat mula sa anumang hanapbuhay.

Ang kurikulum na ito ay maaaring pangasiwaan ng mga pastor, ministro, guro ng paaralan, at mga social worker na may kaalaman at may kadalubhasaan sa pag-unlad ng tao sa buong buhay. Mainam na ang mga mangagasiwa ay babae upang mas maging komportable para sa mga kalahok na magbahagi at makilala sa kanilang mga mangangasiwa. Gayunpaman, ang kurikulum na ito ay hindi limitado sa mga babaeng mangangasiwa dahil maaaring kailanganin na mag-imbita ng mga lalaking mangangasiwa dahil sa kakulangan ng manpower o iba pang dahilan.

Ang pinakamainam na bilang ng mga kalahok ay lima upang maging mas komportable para sa mga ina na ibahagi ang kanilang mga saloobin at karanasan sa loob ng itinakdang takdang panahon. Kung ang mga kalahok ay higit sa limang ina sa bawat sesyon, maaari silang i-grupo sa maliliit na grupo ng lima upang maipatupad ang mga aktibidad.

Background ng Kurikulum

Ang mga magulang ay positibong nakakaimpluwensya sa pag-unlad ng kabataan, kabilang ang emosyonal na pag-unlad at positibong konsepto sa sarili, at binabawasan ang mga peligrosong pag-uugali ng mga kabataan (Beckmeyer, Su-Russell, at Russell 2020, 101-02; Cruz, Laguna, at Mejia-Raymundo 2001, 12-14; Laboviti 2015, 171). Gayunpaman, sa Pilipinas, tatlong panlipunang paradigm: modernisasyon, urbanisasyon, at industriyalisasyon, na binabawasan ang impluwensya ng pamilya sa indibidwal, pinahihintulutan ang higit na mapagpahintulot na mga pamantayan at pag-uugali, at nagiging sanhi ng pagkasira ng tungkulin bilang pamilya (Medina 2001, 273-75). . Ang mga hindi pangkaraniwang bagay na ito ay maaaring magdulot ng posibilidad na bumaba ang panahon ng interaksyon ng magulang-kabataan at impluwensya ng magulang sa kabataan (Cruz, Laguna, at Mejia-Raymundo 2001, 1). Gayundin, ang pandemya mula noong 2020 ay nagdulot ng ilang hamon sa mga pamilya. Kaya, ang mga ina ay maaaring may posibilidad na makaligtaan at hindi tumutugon sa mga emosyonal na pangangailangan ng kanilang mga anak, lalo na sa panahon ng mahalagang yugto ng pagdadalaga at pagbibinata. Kapag ang mga kabataan ay walang paraan upang ilabas ang kanilang mga emosyon, may malaking tendensya para sa kanila na makaranas ng sikolohikal na pagkabalisa.

Ang mga sintomas ng psychological distress ay tumutukoy sa mga negatibong emosyon tulad ng pakiramdam na walang pag-asa, hindi mapakali, madilim, walang silbi, kinakabahan, at kalungkutan (Twenge et al. 2019, 187). Mula nang maging aktibo ang pandemya ng COVID-19 sa Pilipinas noong Enero 2020, naranasan ng mga Pilipino ang mga sintomas na iyon dahil sa impeksyon o pagkamatay ng COVID-19 sa pamilya at

quarantine (Tee et al. 2020, 380). Ang mas masahol pa ay ang katamtaman hanggang banayad na mga sintomas ng depresyon (pakiramdam na nag-iisa, hindi pagkakatulog, pakiramdam na nalulumbay, atbp.) at mga pag-iisip ng pagpapakamatay ay tumaas sa mga kabataan (Puyat et al. 2021, 3; 6). Ayon sa pagsasaliksik na isinagawa sa 2,037 kalahok mula Marso 28 hanggang Abril 12, 2020, ang bawat isang respondente na may edad 12 hanggang 21. 4 ay nakaranas ng stress, pagkabalisa, katamtaman hanggang sa matinding depresyon, at paghihiwalay ng higit sa ibang mga pangkat ng edad (Tee et al. 2020, 380, 388). Sa kasamaang palad, ang mga bilang ng pangangalaga sa kalusugang pangkaisipan at mga propesyonal ay hindi sapat, kaya ang mga taong may sikolohikal na sintomas ay hindi ma-access ang naaangkop na paggamot (Lally, Tully, at Samaniego 2019, 63-64).

Sinabi ni Rohner na "ang pagmamahal ng magulang ay ang nag-iisang pinakamahalagang salik sa buhay ng isang bata" (Rohner 2021, 3). Kaya, ang kanyang teorya sa pangkalahatan ay nagbibigay-diin sa magkaibang lahi na makabuluhang papel ng pagtugon ng magulang sa pagkabata at impluwensya ng habang-buhay sa sikolohikal na pagsasaayos ng mga indibidwal sa kanilang lipunan. Malinaw na ang impluwensya ng magulang ay humihina sa mas matatandang kabataan kaysa sa mga nakababatang kabataan (Miranda et al. 2016, 1353-54; Khaleque 2017, 978; Khaleque 2014, 1420; Khaleque at Ali 2017, 442). Gayunpaman, mahalaga ang pagtugon ng magulang sa iba't ibang isyu na nauugnay sa emosyonal na kalusugan ng kabataan. Lalo na, ang pagtugon ng ina ay napakahalaga sa konteksto ng Filipino. Ang pinaghihinalaang pagtanggap ng ama ay tumataas ng pitong beses na mas mataas na sikolohikal na hindi pagkakasundo ng mga bata at kabataang Pilipino sa edad na walo hanggang 18 at ang pinaghihinalaang

pagtangi ng ina ay nagpapakita ng 13 beses na mas mataas kaysa sa impluwensya ng ama (Diaz 2020). Kaya, ang kurikulum na ito ay idinisenyo upang mapahusay ang pang-unawa ng mga bata. Bukod dito, isusulong nito ang mga pangangailangan ng mga kabataang Pilipino at ang kahalagahan ng tumutugon na ina para sa kanilang emosyonal na kalusugan. Sa wakas, umaasa itong makita ang mga ina na nagpapakita ng pagiging tumutugon na ina pagkatapos makumpleto ang kurikulum na ito.

Takdang Panahon ng Kurikulum

Ang kurikulum na ito ay binubuo ng sampung sesyon na may tig-dalawang oras bawat isa. Maaari itong ipatupad anumang araw ng taon.

Lokasyon ng Lugar

Layunin ng kurikulum na ito na ipatupad sa isang mataong lugar. Maaari itong maging seminar para sa mga ina sa simbahan, paaralan, o komunidad. Ang kurikulum na ito ay magagamit para sa parehong *on-site* at *online* na mga *platform*.

Para sa *on-site platform*, pinakamahusay na magsagawa sa isang *conference room* na may mga mesa at upuan na angkop para sa anim na tao (isang tagapangasiwa at limang miyembro). Opsyonal para sa mangangasiwa na gumamit ng *laptop*. Ang mga sagutang papel para sa bawat sesyon at mga *ballpen* o lapis ay dapat na handa sa lugar.

Para sa *online platform*, ang tagapangasiwa at lahat ng kalahok ay dapat may sariling *gadgets* gaya ng *laptop*, *tablet*, o *mobile phone* na may mga *application* na gagamitin nila na naka-*install* na *media* tulad ng *Zoom* o *Google Meet*. Pinakamainam na ang mga *application* na kanilang gagamitin ay makapagbibigay-daan sa mga tagapangasiwa na ibahagi ang kanilang mga *slide* o *Powe-Point Presentation*. Ang

tagapangasiwa ay magpapadala ng mga sagutang papel sa mga kalahok nang maaga at ang mga kalahok ay dapat maghanda ng kanilang sariling mga *ballpen* o lapis.

Mga Pangkalahatang Layunin ng Kurikulum

Sa mga tuntunin ng kaalaman, ang kurikulum na ito ay naglalayong tulungan ang mga magulang na matukoy, ilarawan, at ipaliwanag ang mga pangangailangan ng mga malabata na bata o *teenage children* at ang kahalagahan ng pagtugon ng ina, partikular sa kanilang emosyonal na kalusugan.

Sa mga tuntunin ng saloobin, ang kurikulum na ito ay naglalayong hikayatin ang mga magulang na ipahayag ang kanilang pagpayag at piliin na maging mas masigasig at tumutugon sa mga emosyonal na pangangailangan ng kanilang mga malabata na anak o *teenage children*.

Sa mga tuntunin ng mga kasanayan, ang kurikulum na ito ay naglalayong bigyan ng kapangyarihan ang mga ina na baguhin ang kanilang mga dating asal sa pakikipag-ugnayan sa kanilang mga malabata na anak o *teenage children* at para magsanay ng tumutugon na ina para sa emosyonal na kalusugan ng kanilang mga anak.

Mga Tukoy na Paksa at Plano ng Aralin

Mayroong sampung mga Plano ng Aralin. Ipinapakita nito ang paksa ng bawat sesyon, mga resulta ng pagkatuto, at mga gawain sa pag-aaral. Ang bawat aralin ay may mga sample na *visual aid* na magagamit ng mga tagapangasiwa bilang mga *slide* ng presentasyon para sa nilalaman ng bawat paksa at kanya-kanyang sagutang papel para sa iba't ibang mga gawain sa pag-aaral. Ang mga tagapangasiwa ay maaaring magdagdag o

magdisenyo ng kanilang sariling mga slide o *Power-Point Presentation* sa pagtatanghal upang ipakilala ang mga nilalaman ng mga paksa.

Unang Sesyon

Paksa	Sino ang anak?	
Mga Materyales	Sagutang Papel, <i>ballpen</i> o lapis	
Mga resulta ng pagkatuto	Kaalaman	Sa pagtatapos ng sesyon, ang mga kalahok ay maglalarawan kung sino ang isang bata mula sa pananaw ng Bibliya.
	Saloobin	Sa pagtatapos ng sesyon, ang mga kalahok ay magpapakita ng paggalang sa kanilang mga anak bilang nilalang sa larawan ng Diyos.
	Mga Kasanayan	Sa pagtatapos ng sesyon, ang mga kalahok ay magpapakita ng mga kasanayan upang ilarawan ang isang bata mula sa pananaw ng Bibliya.
Gawain sa Pagkatuto	Pasaklaw na Gawain	Ang mga kalahok ay magguguhit ng imahe ng bata sa gitnang bahagi ng sagutang papel at isusulat ang kanilang sagot sa tanong na “Sino ang bata?” sa kaliwang bahagi ng kanilang papel. Ito ay upang bigyan sila ng oras na pag-isipan ang kanilang mga iniisip tungkol sa kung sino ang isang bata. Pakitingnan ang Sagutang Papel para sa Pasaklaw na Gawain at Pagpapatupad na Gawain sa ibaba.
	Pampasok na Gawain	Ang tagapangasiwa ay maglalahad ng Biblikal na pananaw ng isang bata. Ang mga sample na materyales ay nakahayag sa ibaba ng talahanayang ito.
	Pagpapatupad na Gawain	Isusulat ng mga kalahok ang kanilang mga bagong kaisipan tungkol sa bata batay sa pananaw ng Bibliya sa kanang bahagi ng kanilang papel. Mangyaring tingnan ang Sagutang Papel para sa Pasaklaw na Gawain at Pagpapatupad na Gawain sa ibaba. Pagkatapos ay ibabahagi ng mga kalahok ang kanilang dati at bagong nakuhang mga kaisipan sa grupo.
	Pagsasama-sama ng Gawain	Ipapakita ng mga kalahok ang kanilang Sagutang Papel sa kanilang kabataan na anak at tatalakayin sa kanila kung paano nagbago ang kanilang pang-unawa. Maaari rin nilang gamitin ang oras na ito para tanungin kung ano ang nararamdaman ng kanilang mga anak at makinig sa kanila.

Mga Hamlimbawang Visual Aid para sa Unang Sesyon

Ang multi-dimensional, kumplikadong mga ideya ng mga bata.

- Ganap na tao at ginawa sa larawan ng Diyos ngunit umuunlad pa rin at nangangailangan ng pagtuturo at patnubay;
- Mga regalo ng Diyos at pinagmumulan ng kagalakan ngunit may kakayahang makasarili at makasalanang mga aksyon;
- Mahina at nangangailangan ng proteksyon ngunit malakas din, matalino, at huwaran ng pananampalataya at pinagkalooban ng mga kaloob na maglingkod sa iba.

Marcia J. Bunge, “Biblical Perspectives Session” (lecture, Asia-Pacific Nazarene Theological Seminary, Taytay, July 11, 2017).

Mga Bata ay...

Sila ay espirituwal na nilalang na katulad ng imahe ng Diyos, ngunit sila ay mas mahina sa pisikal, emosyonal, panlipunan kaysa sa mga nasa hustong gulang.

Ang mga bata ay nagtataglay ng parehong kalakasan (pagkamalikhain, katatagan, potensyal, at pagiging bukas) at mga kahinaan (mura na saloobin o pag-uugali at likas na kasalanan).

Ang mga Bata sa Imahe ng Diyos

- Nilalang ng Diyos ang mga tao ayon sa kanyang larawan (Gen. 1:27).
- Sinabi ni Copsey na ang mga bata ay may kaalaman sa mga banal na lihim dahil sila ay nilikha sa kanyang larawan.

Kathryn Copsey, *From the Ground Up: Understanding the Spiritual World of the Child* (Oxford: The Bible Reading Fellowship, 2005), 85.

Tatlong Presentation Slides para Sagutin ang "Sino ang Bata?"



Isang Sagutang Papel para sa Pagsasaklaw na Gawain at Pampatupad na Gawain.

Pangalawang Sesyon

Paksa	Pangangailangan ng mga Malabata na Bata o <i>Teenage Children</i>	
Mga Materyales	Sagutang Papel, <i>ballpen</i> or lapis	
Mga resulta ng Pag aaral	Kaalaman	Sa pagtatapos ng sesyon, matutukoy ng mga kalahok ang mga pangangailangan ng mga kabataan
	Saloobin	Sa pagtatapos ng sesyon, ang mga kalahok ay sumang-ayon na bigyang-pansin ang mga pangangailangan ng kanilang mga anak na mga kabataan.
	Mga Kasanayan	Sa pagtatapos ng sesyon, sasabihin ng mga kalahok ang mga pangangailangan ng kanilang mga kabataan.
Gawain sa Pag Katuto	Pasaklaw na Gawain	Ibabahagi ng mga kalahok sa kanilang grupo kung paano ang kanilang pakikipag-usap sa kanilang mga malabata na mga kabataan pagkatapos ng nakaraang sesyon at kung paano tumugon sa kanila ang kanilang mga kabataan. Pagkatapos ay isusulat ng mga kalahok ang mga pangangailangan ng mga kabataan sa kaliwang bahagi ng kanilang sagutang papel. Pakitingnan ang Sagutang Papel para sa Pasaklaw na Gawain at Pagpapatupad na Gawain sa ibaba
	Pampasok na Gawain	Ipapakita ng tagapangasiwa ang mga pangangailangan ng mga kabataan. Ang mga sample na materyales ay ipinahiwatig sa ibaba ng talahanayang ito.
	Pagpapatupad na Gawain	Pipiliin ng mga kalahok sa mga kategorya ang dalawang pangangailangan ng kanilang mga anak na mga kabataan na kailangan nilang tuparin. Isusulat nila ito sa gitnang bahagi ngsagutang papel. Pakitingnan ang Sagutang Papel para sa Panimulang Aktibidad at <i>Application On-Site</i> sa ibaba. Pagkatapos ay mag-iisip sila ng Planong Aksyon kung ano ang gagawin para matugunan ang mga pangangailangan ng kanilang mga kabataan na anak at isulat ang mga ito sa kanang bahagi ng sagutang papel. Pakitingnan ang Sagutang Papel para sa Pasaklaw na Gawain at Pagpapatupad na Gawain sa ibaba.
	Pagsasama-sama na Gawain	Ang mga kalahok ay magsasanay ng kanilang mga plano sa bahay.

Mga Halimbawang Visual Aid para sa Ikalawang Sesyon

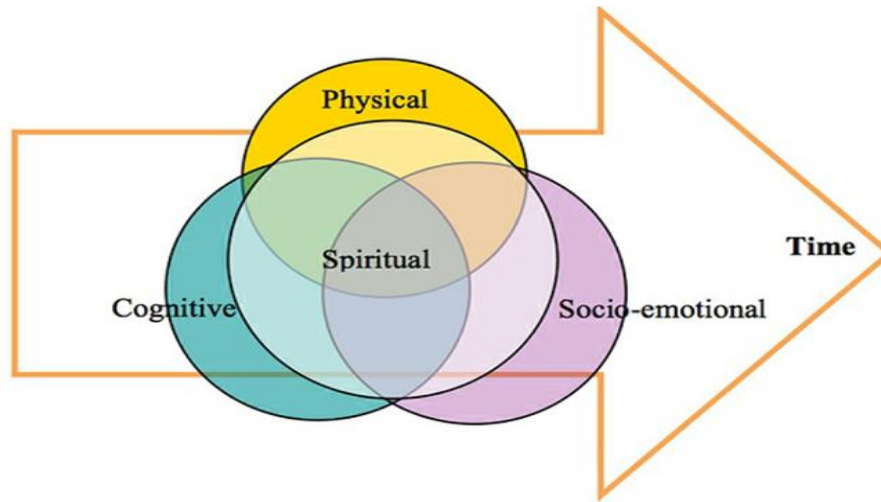
Kategorya	Pangangailangan ng Bata
Pisikal	Bahay, Pamilya, Pera, Kalusugan, kaligtasan, stuktura atbp.
Emosyonal	Kalayaan sap pagpapahayag, kasama, emosyonal na suporta, pag-asa atbp.
Espirituwal	Kaligtasan, Pag lago sa Pananampalataya, Maayos na Relasyon sa Diyos, disiplina, pag-asa, atbp.
Mga akademya	Edukasyon, talent o potensyal napag lago, atbp.
Sosyal	Kaibigan na makakalaro, relasyon, kasanayan sa sosyal, atbp.

Patricia Toland and Rosemary Sabatino, "Intervention Strategies for Children in Crisis" (lecture, Asia-Pacific Nazarene Theological Seminary, Taytay, June 13, 2016).

Epekto ng Espirituwal na Kapinsalaan	Paano gumaling
<p>Baluktot na pagtingin sa sarili</p> <ul style="list-style-type: none"> - Mababang imahe sa sarili - Pag-aalipusta sa sarili (Napoot sa sarili) - Kahiya (Pagtatanggol sa sarili/<i>Sexual exploitation</i>) 	<p><u>Pagbabago ng pananaw sa sarili: Ikaw ay Espesyal</u></p> <p><u>Walang katapusang halaga: Bigyan sila ng pagmamahal, paninindigan, pagsang-ayon, pagiging bukas-palad na may taos-pusong paghihikayat.</u></p> <p>Walang pasubali na pagmamahal, pagtanggap, at pagpapatawad</p> <p>Pagkapoot sa sarili -> Punuin ng pag-ibig ng Diyos</p>
<p>Baluktot na pagtingin sa iba</p> <ul style="list-style-type: none"> - Paghiwalay mula sa iba: Mapanganib na proteksyon sa sarili (Paghihiwalay, katigasan, pagtayo, emosyonal na pader) - Pagkawala ng tiwala 	<p>Pagbabago ng pananaw ng iba: <u>Ipaalam sa kanila na hindi ka nag-iisa.</u></p> <p><u>Pag-aari na nagbibigay ng kaligtasan, katiwasayan, pagkakakilanlan at kahalagahan</u> <u>-> Pag-iisa sa Diyos.</u></p> <p>Ibalik ang tiwala:</p> <ol style="list-style-type: none"> 1) Magtiwala nang naaangkop 2) Wastong hangganan 3) Matutong magtiwala sa Diyos
<p>Baluktot na pananaw sa Diyos</p> <ul style="list-style-type: none"> - Ang pagkakaroon ng Diyos - Kalikasan ng Diyos - Espirituwal na Krisis (Walang kahulugan ng buhay: Pagpapakamatay) 	<ol style="list-style-type: none"> 1) Pakikipagkasundo sa kanilang Lumikha (Nagliligtas ng relasyon) 2) Pagpapalit ng <u>_kasinungalingan_ ng _katotohanan ng Diyos_.</u> 3) Pagbabago ng Larawan ng Diyos Pastol (Naghahanap at Nagliligtas)-> Mabuting Ama (John 10:11-15: Kanyang dakilang sakripisyo)

Christa Foster Crawford, "From Spiritual Harm to Spiritual Healing," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (USA: CLC Publication, 2013), 161-77.

Holistic Child Development



Integral Approach for Children Flourishing (Segura-April et al. 2014, 6).

Apat na E's para sa Balanse sa Pag-aalaga



- 1) Kumain ng balanseng pagkain araw-araw (Pisikal na Pag unlad);
- 2) Masiyahan sa kanyang pagkabata (*Social* na pag unlad);
- 3) Ipahayag ang tunay na damdamin sa pamamagitan ng malusog na pag-uugali (Emosyonal na pag unlad);
- 4) Paganahin upang matuto para sa kanyang kinabukasan (Academic development at spiritual formation).

Apat na Presentation Slides upang Ilahad ang Mga Pangangailangan ng Malabata bata o Teenage Children

Pangangailangan ng malabata <i>o teenage children</i> .	Dalawang Pangangailangan ng Anak ko.	Planong Aksyon
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Isang Sagutang Papel para sa Pamsasaklaw na Gawain at Pampatupad na Gawain.

Pangatlong Session

Paksa	Pagatanggap vs. Pagtanggap I	
Mga Materyales	Sagutang Papel, Filipino Version PAMBATANG PARQ: Ina (Child PARQ: Mother, Short Form), Filipino Version PAMBATANG PARQ: Bata (Child PARQ: Mother, Short Form), ballpen or lapis	
Mga Resultat ng Pagkatuto	Kaalaman	Sa pagtatapos ng sesyon, ang mga kalahok ay tukuyin at ipaliwanag kung ano ang <i>maternal</i> na pagtugon.
	Saloobin	Sa pagtatapos ng sesyon, maipapakita ng mga kalahok ang kanilang pagpayag na maging mas tumutugon sa kanilang mga anak na mga kabataan.
	Mga Kasanayan	Sa pagtatapos ng sesyon, ang mga kalahok ay magsasanay ng isang tumutugon na aksyon sa kanilang mga anak na mga kabataan.
Gawain sa Pagkatuto	Pasaklaw na Gawain	Ibabahagi ng mga kalahok kung paano nila naisagawa ang kanilang mga planong aksyon sa bahay mula sa nakaraang sesyon at kung paano tumugon sa kanila ang kanilang mga kabataan na anak.
	Pampasok na Gawain	Ipapaliwanag ng tagapangasiwa ang <i>IPARTheory</i> ni Rohner tungkol sa Pagtanggap at Pagtanggap ng Magulang. Ang mga sample na materyales ay ipinahiwatig sa ibaba ng talahanayang ito.
	Pagpapatupad na Gawain	Sasagutin ng mga kalahok ang Filipino Version PAMBATANG PARQ: Ina (Child PARQ: Mother, Short Form) kung paano nila tignan ang kanilang istilo ng pag aalaga. Mag-iisip sila ng dalawang praktikal na paraan para ipakita ang kanilang pakikiramay sa kanilang kabataan na mga anak. Pakitingnan ang sagutang papel para sa Pagpapatupad na Gawain at Pagsasama sama ng Gawain sa ibaba.
	Pagsasama sama na Gawain	Iuuwi ng mga kalahok ang Filipino Version PAMBATANG PARQ: Bata (Child PARQ: Mother, Short Form) at hihilingin sa kanilang mga <i>teenager</i> na anak na sagutin ito. Ito ay upang ihambing ang pagkakaiba sa pagitan ng <i>maternal perception</i> at ng mga bata tungkol sa mga istilo ng pagtugon ng mga ina. Magsasanay sila ng dalawang tumutugon na aksyon na hindi pa nila nasubukan noon. Pakitingnan ang sagutang papelpara sa Pagpapatupad na Gawain at Pagsasama sama na Gawain sa ibaba.

Mga Sample na *Visual Aids* para sa Pangatlong Sesyon

Pagtanggap Ng Magulang	Pagtangga ng Magulang
Isang positibong tugon na may mainit na pagpapahayag at empatiya	Isang malupit, hindi mapagmahal na tugon o emosyonal na hindi tumutugon

(Rohner, Khaleque, and Cournoyer 2005b, 305; Rohner, Khaleque, and Cournoyer 2005a, 5-7; Hughes et al. 2005, 383).

Kakaiba, maaaring maramdaman ng kabataan ang pagtangga ng magulang paminsan-minsan kahit na sa mga masaya at malusog na pamilya na nagpapakita ng pagtanggap ng magulang habang sinasadya nilang nakikita at binibigyang-kahulugan ang kanilang pakikipag-ugnayan sa kanilang mga magulang.



(Jager et al. 2016, 2109-11; Limanta 2019, 10, 25; Rohner, K haleque, and Cournoyer 2005b, 308).

Pagtanggap ng Magulang		Pagtangi ng Magulang	
Ang Emosyon ng Magulang sa kanilang mga anak	Mga kaukulang aksyon sa kanilang mga anak	Ang Emosyon ng Magulang sa kanilang mga anak	Mga kaukulang aksyon sa kanilang mga anak
Mainit	<p>Pagmamahal sa pamamagitan ng pisikal (hal., halik, yakap, lambing, atbp.) a berbal (hal., papuri, papuri, pagsasabi ng magagandang bagay sa o tungkol sa) mga ekspresyon.</p>	Hostility	Agresibong pisikal (hal., hampasin, kagat, kalmot, tulak, kurutin, atbp.) at berbal (hal., sumpa, panunuya, pagmamaliit, pagsasabi ng walang isip, hindi maganda, malupit na mga bagay)
		Walang-Interes	Pagpapabaya (pisikal at sikolohikal na kawalan ng kakayahan ng magulang at walang pansin sa mga pangangailangan ng bata)
		Hindi Nakikilalang Pagtangi (Nararamdaman ng bata na hindi siya minamahal, hindi pinahahalagahan, o hindi inaalagaan)	

Interpersonal Acceptance-Rejection Theory (IPARTheory) (Rohner, Khaleque, and Cournoyer 2005b, 306-07)

Tatlong *Presentation Slides* para ipakita ang *IPARTheory*

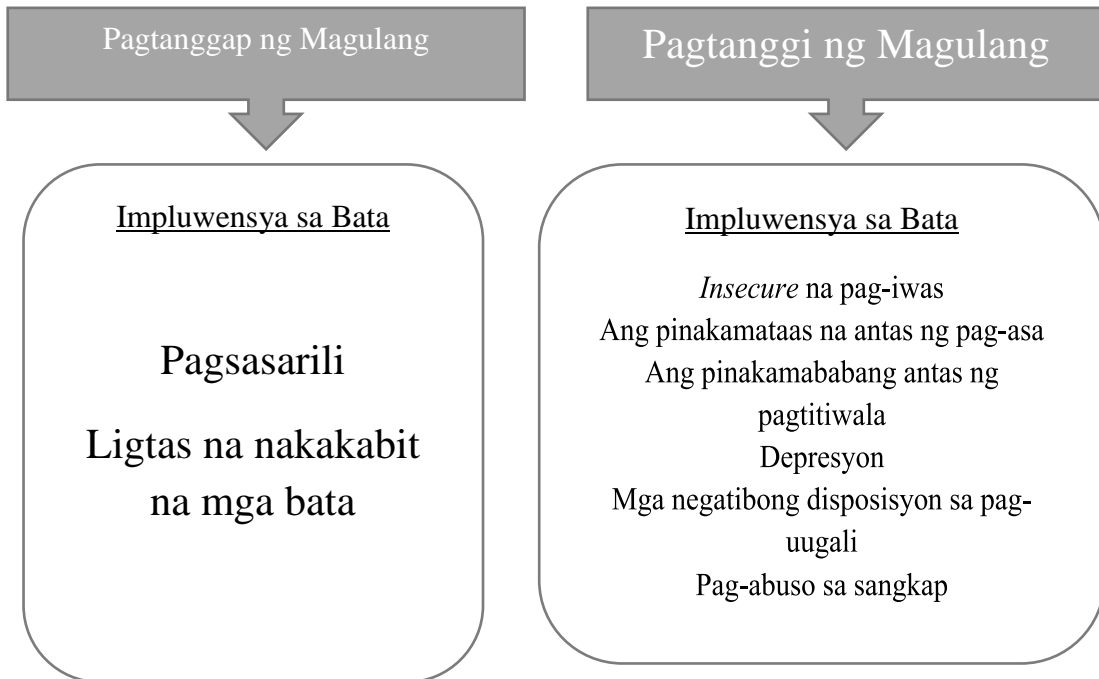
Mga Planong uoang Maging Tumutugon	Aktwal na Pagsasanay
<ul style="list-style-type: none">••	<ul style="list-style-type: none">••

Isang Sagutang Papel para sa Pagpapatupad na Gawain at Pagsasama-sama na Gawain.

Pang-apat na Sesyon

Paksa	Pagiging Tumutugon vs. Pagtatanggi II	
Mga Materyales	Sagutang Papel, Filipino Version CHILD PARQ: Ina (Short Form), Filipino Version CHILD PARQ: Bata (Short Form), ballpen or lapis	
Mga Resulta sa Pagkatuto.	Kaalaman	Sa pagtatapos ng sesyon, ang mga kalahok ay magbibigay-kahulugan at ipaliwanag ang positibong impluwensya ng tumutugon na ina sa kanilang mga anak na mga kabataan.
	Saloobin	Sa pagtatapos ng sesyon, ang mga kalahok ay magpapakita ng higit na tumutugon na mga saloobin sa kanilang mga anak na mga kabataan.
	Mga Kasanayan	Sa pagtatapos ng sesyon, ang mga kalahok ay magsasanay ng <i>maternal</i> na pagtutugon sa kanilang mga malabata na mga anak na mga kabataan sa bahay.
Gawain sa Pagkatuto.	Pasaklaw na Gawain	Pupunan ng mga kalahok ang kaliwang bahagi ng sagutang papel na “Ako noon! Gagawin ko!” upang pag-isipan ang kanilang karaniwang mga istilong tumutugon. Pakitingnan sagutang papel para Pasaklaw na Gawain at Pagpapatupad na Gawain sa ibaba.
	Pampasok Na Gawain	Ipaliliwanag ng tagapangasiwa ang impluwensya ng pagtugon ng ina sa emosyonal na kalusugan ng mga anak na mga kabataan.
	Pagpapatupad na Gawain	Makikita ng mga kalahok ang resulta ng Filipino Version PAMBATANG PARQ: Bata (Child PARQ: Child, Short Form) at maaalala ang kanilang karaniwang istilo ng pagtugon. Pagkatapos ay pupunuin nila ang kanang bahagi ng “Ako ay! Gagawin ko!” sa sagutang papel kung paano sila magiging mas tumutugon sa kanilang mga <i>teenager</i> na anak kaysa sa nakaraan. Pakitingnan ang sagutang papel para sa Pasaklaw na Gawain at Pagpapatupad na Gawain sa ibaba.
	Pagsasama-sama ng Gawain	Magsasanay ang mga kalahok ang kanilang isinulat sa kanilang sagutang papel. Pagkatapos ay susuriin nila kung gaano ka matagumpay ang kanilang pagsasanay sa bahay.

Mga Sample *Visual Aids* para sa Pang-apat na Sesyon



Buod ng Epekto ng Pagtanggap ng Magulang-Pagtangga sa mga Bata

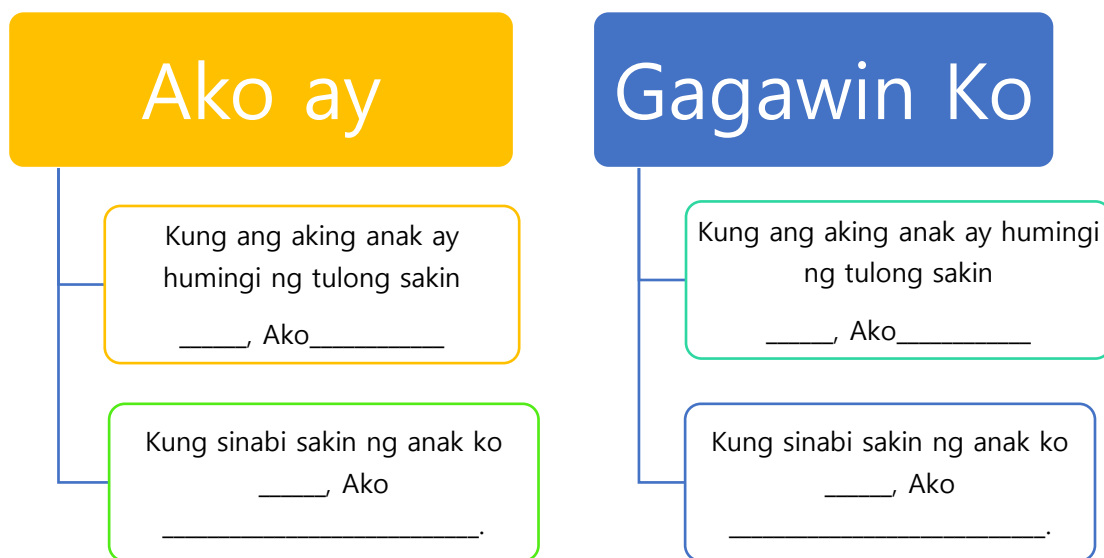
Ang mga kabataan na nakakita ng mas mataas na antas ng pagtanggap ng ina ay mas nagpapahayag.

Ang mga kabataan na nakatira kasama ang kanilang mga biyolohikal na ina ay mas nagpapahayag at nakaranas ng mas mataas na antas ng pagtanggap

-From the Survey conducted in Cupang in 2021-



Dalawang Presentation Slides para Ipakita ang Impluwensiya ng Maternal



Isang Sagutang Pape “Ako ay! Gagawin Ko” para sa Pasaklaw na Gawain at Pampatupad na Gawain.

Ikalimang Sesyon

Paksa	Positibong Pagpapalaki para sa Emosyonal na Pagpapahayag	
Mga Materyales	Sagutang Papel, ballpen o lapis	
Mga resulta ng pagkatuto	Kaalaman	Sa pagtatapos ng pagpupulong, ang mga kalahok ay matutukoy ang kahulugan at maipapaliwanag kung bakit ang emosyonal na pagpapahayag ay nauugnay sa emosyonal na kalusugan.
	Saloobin	Sa pagtatapos ng pagpupulong, ang mga kalahok ay maipapakita ang pagiging bukas upang hayaan ang kanilang mga anak na ipahayag ang kanilang mga damdamin.
	Mga Kasanayan	Sa pagtatapos ng pagpupulong, ang mga kalahok ay masasanay ang husay upang matulungan ang kanilang mga anak na ipahayag ang kanilang damdamin sa mga paraan na katanggap-tanggap sa lipunan.
Gawain sa Pagkatuto	Pasaklaw na Gawain	Makukuha ng mga kalahok ang resulta ng kanilang mga anak tungkol sa Filipino Version CHILD PARQ: Mother (Short Form). Pagkatapos ay ihahambing nila ang pagkakaiba sa pagitan ng kanilang sariling pang-unawa at sa pang-unawa ng kanilang mga anak sa kanilang pagtugon.
	Pampasok na Gawain	Matututuhan ng mga kalahok ang kahalagahan ng emosyonal na kalusugan at ang makabuluhang impluwensyang pagtugon ng ina sa emosyonal na kalusugan ng kanilang mga anak.
	Pagpapatupad na Gawain	Sasagutin ng mga kalahok ang Emotional Expressive Scale (EES) tungkol sa kanilang mga anak habang nakikita nila ang emosyonal na pagpapahayag ng kanilang mga anak. Isasalamin nila kung paano ipinapahayag ng kanilang mga anak ang kanilang damdamin sa mga partikular na sitwasyon at kung paano sila tumugon sa kanila sa pamamagitan ng paggamit ng sagutang papel para sa Pagsasagawa sa ibaba.
	Pagsasama-sama ng Gawain	Iuuwi ng mga kalahok ang EES Form at hihilingin sa kanilang mga anak na sagutin ito. Ito ay upang ihambing ang pagkakaiba sa pagitan ng pag-unawa ng ina at ng pag-unawa ng mga bata tungkol sa emosyonal na pagpapahayag ng mga bata.

Mga Halimbawang Visual Aids para sa Ikalimang Sesyon

Mga Positibong Tagapag-alaga para sa Positibong Pagpapalaki

Mainit/pagmamahal

Papuri

Suporta

Pamamaraan ng pangangatwiran

Kaliwan

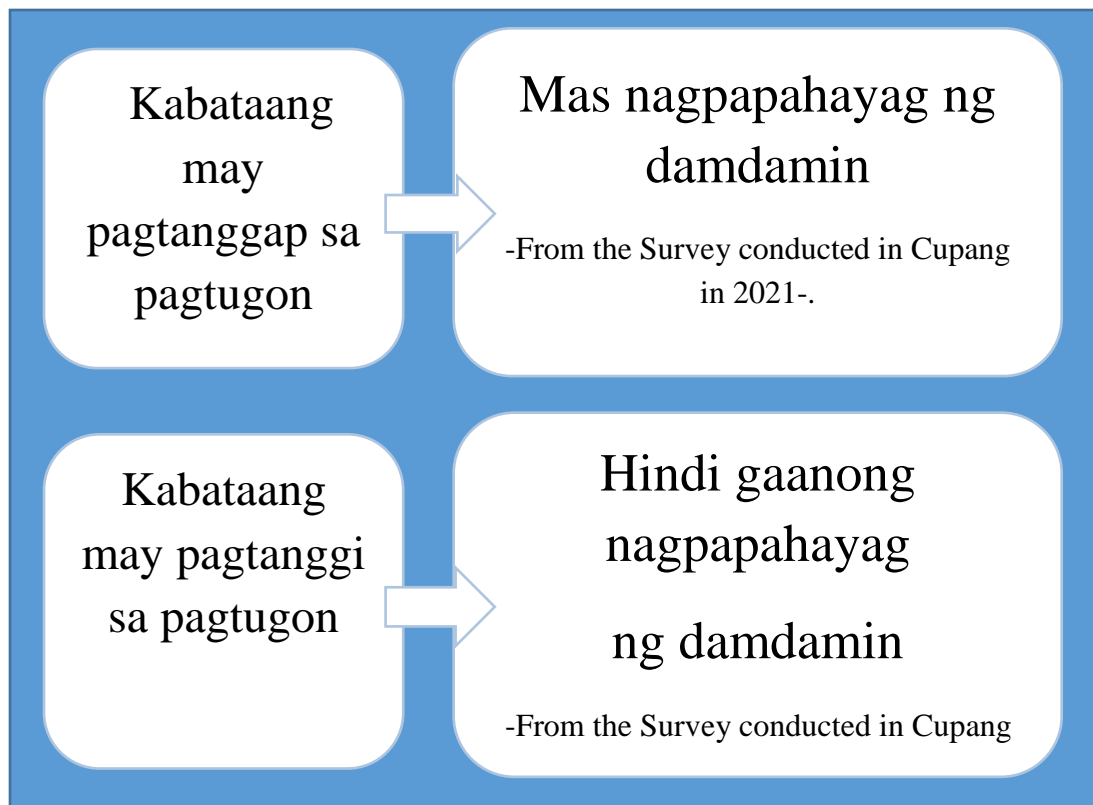
Ang mga positibong tagapag-alaga ay ang mga gumagawa ng mainit, mapagmahal at kapalit na pagtugon. May posibilidad nilang lapitan ang mga bata nang may suporta, panghihikayat at mariin na saloobin sa ilalim ng magkaparehong katwiran na may matibay na hangganan.

(Rohner, Khaleque, Cournoyer 2005, 5-7)

Impluwensya ng Positibo na may pagtanggap sa pagpapalaki sa Kaunlaran ng Kabataan

Ang positibo na may pagtanggap sa pagpapalaki ay may kontribusyon din sa pagbuo ng positibong personalidad, pagpapahalaga sa sarili, at mga kasanayan sa paglutas ng problema

(Rohner 2016, 10-11; Rohner, Khaleque, and Cournoyer 2005b, 312; Ramírez-Uclés et al. 2018, 1340-41; Kakihara et al.



Tatlong Presentation Slides upang Ipakita ang Mga Katangian ng Positibong Tagapagalaga at Impluwensiya ng Pagtanggap tulad ng isang Ina sa Emosyonal na Pagpapahayag ng Kabataan

Kapag ang aking anak ay gustong maglaro kahit na sinabi ko sa kanya na itigil ito at matulog

Nagpapahayag ang aking anak
ng

_____ at
(kanilang damdamin)

(kanilang kilos)

Pagkatapos ako ay

(aking tugon sa kanyang damdamin at kilos)

Kapag ang aking anak ay may di pagkakaintindihan sa kanyang mga kaibigan

Nagpapahayag ang aking anak ng

_____ at
(kanilang damdamin)

(kanilang kilos)

Pagkatapos ako ay

(aking tugon sa kanyang damdamin at kilos)

Sagutang Papel para sa Pagsasagawa

Ikaanim na Sesyon

Paksa	Positibong Pagpapalaki – Paraan ng Kaharian sa Papapaka-nanay	
Mga Materyales	Sagutang Papel, ballpen o lapis	
Mga resulta ng pagkatuto	Kaalaman	Sa pagtatapos ng pagpupulong, matutukoy ng mga kalahok ang mga positibong paraan ng pagpapalaki.
	Saloobin	Sa pagtatapos ng pagpupulong, ang mga kalahok ay maipapakita ang mas positibo at tumutugon na mga saloobin para sa kanilang mga anak sa kanilang pang-araw-araw na buhay.
	Mga Kasanayan	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasanay ng positibo at paraan ng Kaharian na mga disiplina sa pagpapaka-nanay sa kanilang mga anak.
Gawain	Pasaklaw na Gawain	Magbahagi ang mga kalahok ng mga ideya kung paano ipinapahayag ng kanilang mga anak ang kanilang mga damdamin at kung paano sila tumugon sa kanilang mga anak batay sa Gawain na ginawa nila sa nakaraang pagpupulong.
	Pampasok na Gawain	Ibahagi ng Tagapangasiwa ang paraan ng Kaharian sa positibong pagpapalaki sa pagdidisiplina sa kanilang mga anak bilang mga miyembro ng kanilang lipunan.
	Pagpapatupad na Gawain	Titingnan ng mga kalahok ang ilustrasyon sa kanilang sagutang papel at isusulat ang kanilang pagkaunawa dito. Pagkatapos ay ibabahagi nila ito sa kanilang grupo at pag-uusapan kung paano dinidisiplina ang kanilang mga anak bilang miyembro ng kanilang lipunan. Tingnan ang sagutang papel para sa Pagsasagawa sa ibaba.
	Pagsasama-sama ng Gawain	Ibahagi ng mga kalahok ang kanilang pagkaunawa sa ilustrasyon sa kanilang sagutang papel sa kanilang mga anak at pakikinggan ang mga iniisip ng kanilang mga anak.

Mga Halimbawang Visual Aids para sa Ikaanim na Sesyon

Disiplina ng Magulang sa Pamamagitan ng Komunikasyon

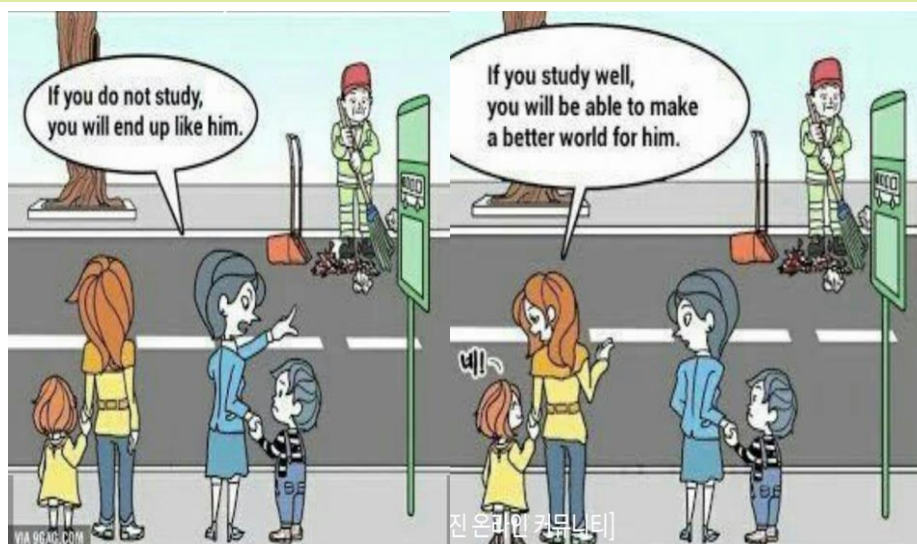
- Bumuo ng mahusay at mariin na ugnayan upang pangasiwaan ang galit ng kanilang anak
- Kilalanin ang kanilang mga pangangailangan
- Tumugon sa kanilang mga pangangailangan



Paraan ng Kaharian sa Pagpapalaki

- Turuan ang ating mga anak na maging masigasig at bumuo ng kakayahan ayon sa pagtawag ng Diyos
- Turuan sila kung paano makiramay
- Turuan silang itaguyod ang Win-Win Solution at hindi makasarili, at hindi tumuon sa pagiging makasarili at kasakiman.

Dalawang Presentation Slides para Positibong Pagpapalaki



<https://www.facebook.com/TruthInsideOfYou/photos/a.529002447165761/1226578507408148/?type=1&theater>

T. Sinong ina ang nagpapakita ng positibong pagpapalaki? Bakit?

T. Ano ang gusto mong gawin para madisiplina ang iyong mga anak bilang miyembro ng kanilang lipunan?

T. Paano iniisip ng iyong mga anak ang tungkol sa ilustrasyon?

Isang Sagutang Papel para sa Pagpapatupad na Gawain

Ikapitong Sesyon

Paksa	Marahan na Disiplina para sa Emosyonal na Kalusugan	
Mga Materyales	Sagutang Papel, ballpen o lapis	
Mga Resulta ng Pagtuto	Kaalaman	Sa pagtatapos ng pagpupulong, matutukoy at maipapaliwanag ng mga kalahok ang marahan na disiplina para sa kanilang mga anak at kung paano nauugnay ang pagpipigil sa sarili sa emosyonal na kalusugan ng mga bata.
	Saloobin	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasagawa ng higit na marahan at mainit na pag-uugali sa mga pangangailangan ng emosyonal na kalusugan ng kanilang mga anak.
	Mga Kasanayan	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasanay kung paano disiplinahin ang kanilang mga anak upang ipakita ang pagpipigil sa sarili para sa kanilang emosyonal na kalusugan.
Gawain	Pasaklaw na Gawain	Pupunan ng mga kalahok ang sagutang papel tungkol sa kanilang karaniwang paraan ng pagpapahayag ng emosyon. Pakitingnan ang gawain para sa Pasaklaw na Gawain sa ibaba.
	Pampasok na Gawain	Ipapaliwanag ng mga tagapangasiwa ang dahilan ng marahan na disiplina at pagpipigil sa sarili para sa emosyonal na kalusugan ng mga bata.
	Pagpapatupad na Gawain	Ang mga kalahok ay bubuo ng mga estratehiya kung paano magsanay ng marahan na disiplina sa mga sitwasyong nakakapukaw ng damdamin. Pagkatapos ay ibabahagi nila ito sa kanilang grupo. Pakitingnan ang gawain para sa Pagsasagawa sa ibaba.
	Pagsasama-sama ng Gawain	Tatalakayin ng mga kalahok ang mga hakbang para sa marahan na disiplina sa kanilang mga anak. Pakitingnan ang sagutang papel para sa Pagsasama na Gawain sa ibaba.

Mga Halimbawang Visual Aid para sa Ikapitong Sesyon

Dahilan ng Marahan na Disiplina

“Mga magulang, huwag ninyong ibuyo sa paghihimagsik laban sa inyo ang inyong mga anak. Sa halip, palakihin ninyo sila ayon sa disiplina at aral ng Panginoon.”

(Ef. 6:4 MBBTAG)

Dahilan ng mga Pangangailangan ng Pagpipigil sa Sarili

Higit na mabuti ang tiyaga kaysa kapangyarihan, at ang pagsupil sa sarili kaysa pagsakop sa mga bayan.

(Kaw. 16:32 MBBTAG)

Pagpipigil sa Sarili para sa Emosyonal na Kalusugan

Ang Pagpipigil sa Sarili ay hindi panlilinlang sa aking damdaming umuusig sa aking panloob na pagnanasa.

Ito ay isang pagsasanay upang makamit ang mas mahusay na mga layunin sa pamamagitan ng pagsasaayos ng mga emosyon, pag-iisip, at pagkilos ng isang tao

(<https://en.wikipedia.org/wiki/Self-control>)

Disiplina

- Kahulugan: Pagsasanay sa karunungan, kabutihan, at pagpipigil sa sarili: isang taong may disiplina = may pagpipigil sa sarili.
- Ang layunin ng pagdidisiplina sa bata: Pagsasanay (oo, kung minsan ay may kasamang parusa) na nagpapalakas sa ating mga anak na maging mas mapagpipigil sa sarili.

Robert J. Morgan, *Effective Parenting: Raising Kids in the Nurture and Instruction of the Lord*. (Paranaque: Church Strengthening Ministry, 1996), 88.

Para sa Mabisang Disiplina

- Ang Katapatan ng Pag-ibig - ang pangunahing paraan upang magkaroon ng masunurin at disiplinadong mga bata ay ang mahalina sila nang buong puso at lambing na hinding-hindi nila gugustuhing sirain ang iyong puso.
- Sawayin sa pamamagitan ng mga Maingat na mga salita, pagbibigay ng pagmamahal, malinaw na pananalita.

Robert J. Morgan, *Effective Parenting: Raising Kids in the Nurture and Instruction of the Lord*. (Paranaque: Church Strengthening Ministry, 1996), 91.

Kalagayan	Aking Emosyon	Aking Reaksyon	Ang Emosyonal na Pagpapahayag ng Aking Anak
1. Sinabi ko sa aking anak na matulog ng maaga para sa klase kinabukasan. Gayunpaman, nalaman kong nakatulog siya ng 4 ng uamga dahil sa online games.			
2. Hindi ibinigay ng guro ng aking anak ang huling marka sa aking anak dahil hindi niya nakumpleto ang kanyang mga proyekto.			
3. Ayaw magsimba ng anak ko sa Linggo.			

Isang Sagutang Papel para sa Pasaklaw na Gawain

Kalagayan	Aking Emosyon	Pagpipigil sa sarili para sa Marahan na Disiplina	Benepisyo ng Pagpipigil sa Sarili
1. Sinigawan ko ang aking anak dahil nahuli siya sa klase dahil sa online games.			
2. Pinalo ko ang aking anak at kinuha ang kanyang cellphone dahil hindi niya natapos ang kanyang mga proyekto.			
3. Iniwan ko ang aking anak sa bahay dahil ayaw niyang magsimba sa Linggo.			

Isang Sagutang Papel para sa Pagpapatupad na Gawain

Panuto: Pumili ng isang kalagayan sa mga ibinigay na sitwasyon sa iyong sagutang papel at kausapin ang iyong anak kung paano niya nais na disiplinahin mo sila para sa kanilang pagpipigil sa sarili. Bumuo ng mga hakbang para sa Marahan na Disiplina kasama ng iyong anak.

1) Ang pinili kong kalagayan:

2) Mga Hakbang para sa Marahan na Disiplina

Isang Sagutang Papel para sa Pagsasama-sama ng Gawain

Ikawalong Sesyon

Paksa	Pagpapalaki sa Kabataan	
Mga Materyales	Sagutang Papel, ballpen o lapis	
Mga Resulta ng Pagkatuto	Kaalaman	Sa pagtatapos ng pagpupulong, ang mga kalahok ay matutukoy ang kahulugan ng "pagtanggap na pag-ibig" at "pagbabagong pag-ibig" at makikilala ang kaibahan ng dalawa.
	Saloobin	Sa pagtatapos ng pagpupulong, maipapakita ng mga kalahok ang parehong pagtanggap na pag-ibig at pagbabagong pag-ibig sa kanilang mga anak.
	Mga Kasanayan	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasanay ng pagtugon ng isang nanay ayon sa kung kailan kailangan ng kanilang mga anak ang kanilang pagtanggap sa pag-ibig at ang kanilang pagbabagong pag-ibig.
Gawain sa Pagkatuto	Pasaklaw na Gawain	Ibahahagi ng mga kalahok sa kanilang grupo kung paano nagbago ang kanilang mga paraan ng pagpapalaki habang nagbibinata/nagdadalaga ang kanilang mga anak.
	Pampasok na Gawain	Ang tagapangasiwa ay magpapaliwanag at kikilalanin ang pagkakaiba sa pagitan ng pagtanggap na pag-ibig at pagbabagong pag-ibig, at kung paano dapat baguhin ng mga magulang ang kanilang paraan ng pagpapalaki kapag ang kanilang mga anak ay nagbibinata/nagdadalaga na.
	Pagpapatupad na Gawain	Ang mga kalahok ay magsusulat kung kailan sila magsasanay sa pagtanggap na pag-ibig at pagbabagong pag-ibig para sa kanilang mga anak sa sagutang papael para sa Pagsasagawa. Pagkatapos ay ibahahagi nila ito sa kanilang grupo.
	Pagsasama-sama ng Gawain	Tatanungin ng mga kalahok ang kanilang mga anak kapag kailangan nila ang pagtanggap na pag-ibig at pagbabagong pag-ibig at isulat ang mga mungkahi ng kanilang mga anak sa sagutang papel para sa Pagsasama na Gawain.

Mga Halimbawang Visual Aid para sa Ikawalong Sesyon

Pagtanggap na Pag-ibig at Pagbabagong Pag-ibig

- Pagtanggap na Pag-ibig: Pinagtitibay nito ang pagkatao ng bata
- Pagbabagong Pag-ibig: Hinahangad nito ang kapakanan ng bata.

Michael J. Sandel, "The Case Against Perfection: What's Wrong With Designer Children, Bionic Athletes, And Genetic Engineering," *The Atlantic Monthly* 293, no. 3 (April): 51, PMID: 15468473.

Pagpapalaki sa Kabataan

Tayo ay nagbago

1. mula sa pamamahala patungo sa pakikisama.
2. mula sa pakikipag-usap patungo sa pakikinig.
3. mula sa paggugol ng oras sa kanila patungo sa paggugol ng mas maraming oras sa kanila
4. mula sa pagsaway patungo sa pagpapapanatag, lalo na sa mga tatay.
5. mula sa pangangaral patungo sa pagdarasal

Robert J. Morgan, *Effective Parenting: Raising Kids in the Nurture and Instruction of the Lord*. (Paranaque: Church Strengthening Ministry, 1996), 78-83.

Dalawang Presentation Slides para sa Pagpapalaki sa Kabataan

Kailan sasanayin ang Pagtanggap na Pag-ibig	Kailan sasanayin ang Pagbabagong Pag-ibig
1.	1.
2.	2.
3.	3.

Isang Sagutang Papel para sa Pagpapatupad na Gawain

Kailan kailangan ng iyong anak ang Pagtanggap na Pag-ibig?	Kailan kailangan ng iyong anak ang Pagbabagong Pag-ibig?
1.	1.
2.	2.
3.	3.

Isang Sagutang Papel para sa Pagsasama-sama ng Gawain

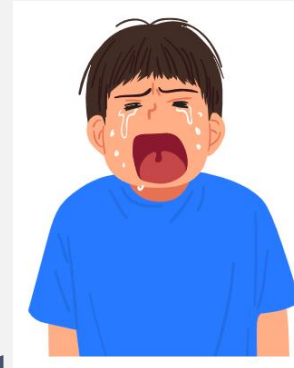
Ikasiyam na Sesyon

Paksa	Emosyonal na Kalusugan ng Bata – Pamamahala ng Kalungkutan	
Mga Materyales	Sagutang Papel, ballpen o lapis	
Mga Resulta ng Pagkatuto	Kaalaman	Sa pagtatapos ng pagpupulong, matutukoy at maipapaliwanag ng mga kalahok ang limang yugto ng kalungkutan.
	Saloobin	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasagawa ng mas positibo at sumasang-ayon na mga saloobin sa negatibong emosyonal na pagpapahayag ng kanilang mga anak.
	Mga Kasanayan	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasanay ng mga positibo at sumasang-ayon na disiplina sa pagiging ina sa kanilang mga anak at iba pang mga bata sa kanilang komunidad.
Gawain sa Pagkatuto	Pasaklaw na Gawain	Ibabahagi ng mga kalahok ang kanilang pag-uusap ng kanilang mga anak tungkol sa ilustrasyon sa kanilang sagutang papel.
	Pampasok na Gawain	Ang mga tagapangasiwa ay ibabahagi ang mga yugto ng kalungkutan at ang malusog na mga proseso ng kalungkutan upang disiplinahin ang kanilang mga anak tungkol sa pakikisalamuha sa emosyon.
	Pagpapatupad na Gawain	Ang mga kalahok ay bubuo ng mga estratehiya kung paano maging makabuluhang nasa gulang para sa mga bata mula sa mga nasirang pamilya at upang bigyang lakas ang mga nagdadalamhating bata na maging matatag. Pakitingnan ang sagutang papel para sa Pagsasagawa.
	Pagsasama-sama ng Gawain	Ang mga kalahok ay mananalangin at magsasanay ng kanilang mga estratehiya sa kanilang tunay na buhay.

Mga Halimbawang Visual Aid para sa Ikasiyam na Sesyon

Limang Yugto ng Kalungkutan

- Pagtangga: Emosyonal na Pamamanhid
- Galit na Kasunduan (nais na ang kanilang pagkawala ay maibalik.)
- Depresyon (kawalan, kalungkutan sa katotohanan)
- Pagtanggap (Pagtanggap ng bagong pamumuhay)



Kim Hoover, "Children & Grief," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (Fort Washington, PA: CLC Publications, 2013), 45-46.

Maayos na Proseso ng Kalungkutan

- Mahal ka ng Diyos¹⁾
- Pagkilala sa pagkatalo
- Pagpapahayag ng mga damdamin sa presensya ng aktibong tagapakinig
- Pagpapalakas na suporta mula sa mga tao at komunidad²⁾

1) Marjorie McDermid, "God's Pattern and Plan for Children: Valued, Accepted, Loved," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (Fort Washington, PA: CLC Publications, 2013), 31.

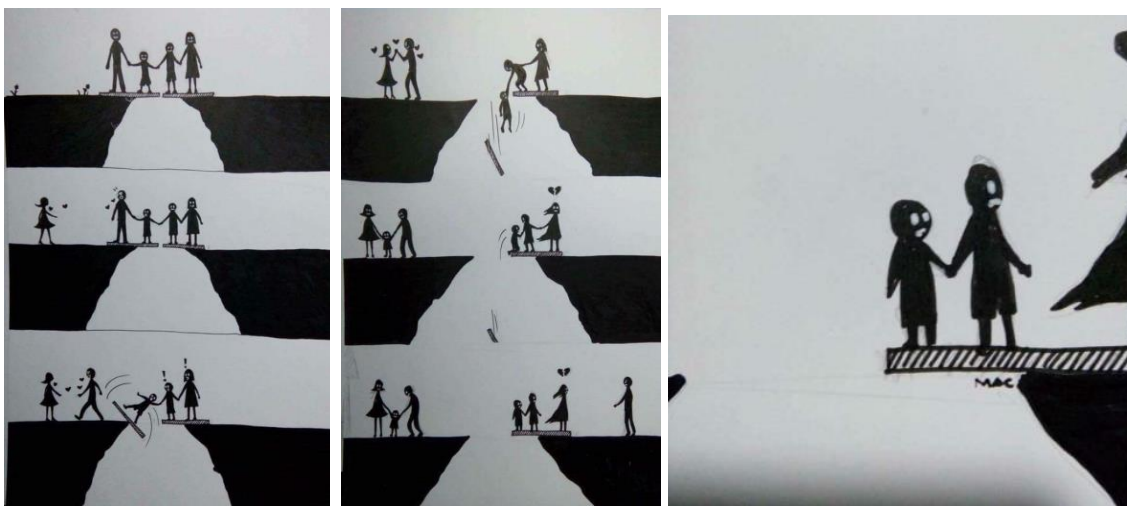
2) Kim Hoover, "Children & Grief," in *Healing for Hurting Hearts: A Handbook for Counseling Children and Youth in Crisis*, ed. Phyllis Kilbourn (Fort Washington, PA: CLC Publications, 2013), 51.

Emosyonal na Kalusugan ni Goot:

- 1) Kayamanan (bumuo ng pakikiramay),
- 2) Angkop (isaalang-alang ang kahihinatnan at hanapin ang angkop na pag-uugali upang ipahayag ang damdamin at makuha ang nais na kahihinatnan), at
- 3) Kontrol (kontrolin ang kilos ayon sa pananaw at direksyon ng layunin).

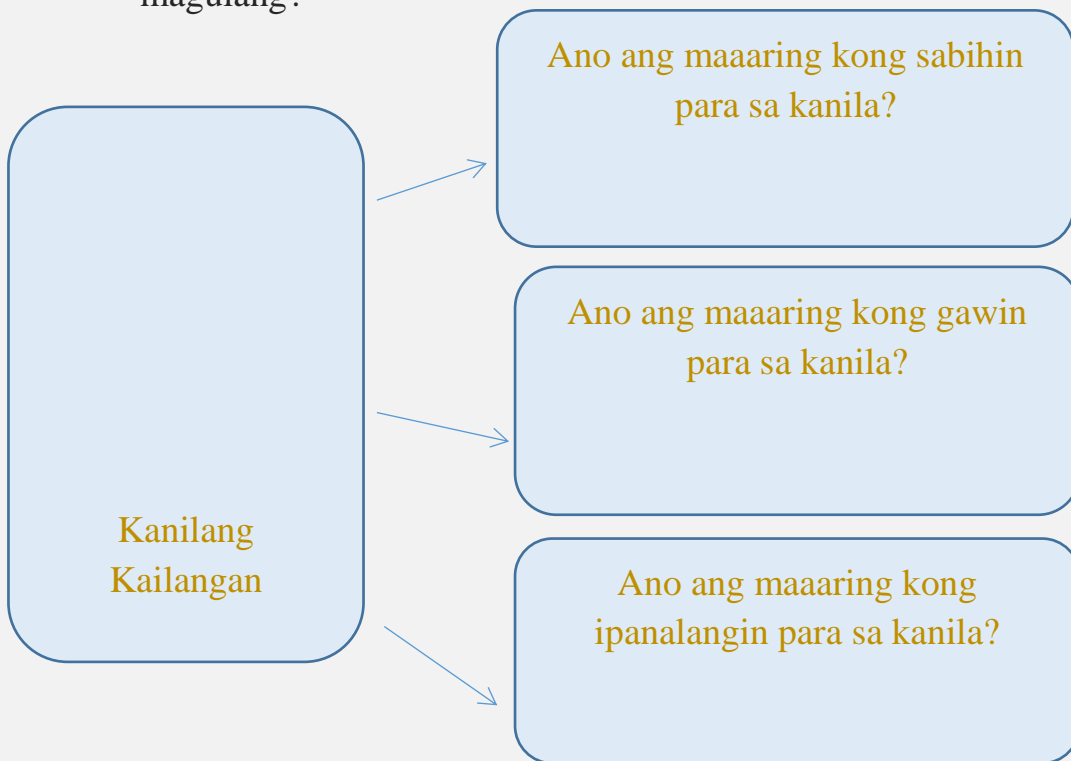
Mary Vander Goot, *Healthy Emotions: Helping Children Grow* (Grand Rapids, MI: Baker Book House Company, 1987), 27-44.

Tatlong Presentation Slides para sa Emosyonal na Pakikipagkapwa



May Peh, LUSTFULNESS = BROKEN FAMILY, accessed Nov. 16, 2018, https://www.facebook.com/MayOctosiotheaPicaPeh/media_set?set=a.2430142840545951&type=1

Tanong: Ano ang maaari nating gawin para sa mga bata sa ilustrasyon bilang makabuluhang mga nasa hustong gulang na hindi magulang?



Isang Sagutang Papel para sa Pagpapatupad na Gawain

Ikasampung Sesyon

Paksa	Pagpapalaki sa mga Nagdadalamhating Mga Bata	
Mga Materyales	Sagutang Papel, ballpen o lapis	
Mga Resulta ng Pagkatuto	Kaalaman	Sa pagtatapos ng pagpupulong, matutukoy at maipapaliwanag ng mga kalahok ang mga gawain ng pagpapalaki sa pagpapanumbalik ng nagdadalamhating mga bata.
	Saloobin	Sa pagtatapos ng pagpupulong, ang mga kalahok ay magsasagawa ng positibo at sumasang-ayon na mga saloobin sa mga nagdadalamhating bata sa kanilang komunidad para sa kanilang emosyonal na pagpapanumbalik.
	Mga Kasanayan	Sa pagtatapos ng pagpupulong, susuriin ng mga kalahok ang kahulugan ng nagdadalamhating bata at malalaman kung paano sila tutulongang maibalik ang kanilang emosyonal na kalusugan.
Gawain sa Pagkatuto	Pasaklaw na Gawain	Ibahahagi ng mga kalahok sa kanilang grupo kung kailan kailangan ng kanilang mga anak ang pagtanggap o pagbabagong pag-ibig.
	Pampasok na Gawain	Ipapaliwanag ng mga tagapangasiwa ang kaugnayan sa pagitan ng trauma at emosyonal na pagpapahayag.
	Pagpapatupad na Gawain	Susuriin ng mga kalahok ang panganib ng mga batang nasa Ukraine na nagbabanta sa kanilang emosyonal na kalusugan sa digmaan. Pagkatapos ay ibahahagi nila ang kanilang pagsusuri sa kanilang grupo. Pakitingnan ang sagutang papel para sa Pagsasagawa.
	Pagsasama-sama ng Gawain	Susuriin ng mga kalahok ang panganib ng mga bata sa kanilang komunidad. Pakitingnan ang sagutang papel para sa Pagsasama na Gawain.

Mga Halimbawang Visual Aid para sa Ikasampung Sesyon

	Kung Paano sila Mag-isip	Kung Paano sila Makaramdam	Kung Paano sila Magpahayag	Kung Paano sila nakikipag-ugnayan sa iba
Batang Malusog sa Emosyonal	Ang kanilang pagsasalita, ang kanilang reaksyon, at ang kanilang paglalaro ay nagpapakita ng kanilang mga iniisip. Iniisip nila na mapoprotektahan sila ng lipunan.	Sari-saring emosyon ang kanilang nararamdaman. Nararamdaman nila ang seguridad at pag-aari.	Nagpahayag sila nang direkta at tapat.	Direktang ipinapahayag nila ang kanilang nararamdaman at iniisip sa mga tao.
Malusog na Bata sa Digmaan	Iniisip nila na hindi sila ligtas. Wala silang nararanasan na proteksyon ng lipunan at kawalan ng tiwala. Ngunit sa tingin nila ay limitado ang pakiramdam ng hustisya at pagiging patas.	Nakakaramdam sila ng takot mula sa karahasan. Nakadarama sila ng kalungkutan, kawalan ng tiwala, at kawalan ng kaugnayan dahil sa kanilang pagkawala. Nagprotesta sila laban sa mga kaganapang nauugnay sa digmaan at galit na may kalituhan.	Nagpapahayag sila ng galit, kalungkutan, at takot.	Kasama pa rin nila ang kanilang mga tagapag-alaga at pinagkakatiwalaang matatanda, kaya maaari silang makipag-usap mula sa loob o makipag-ugnayan sa iba tungkol sa kanilang mga karanasan.
Na-trauma na bata na may mga sintomas	Hindi nila naiintindihan ang digmaan at iniisip na ang kanilang mga magulang ay walang lakas.	Nakakaramdam sila ng pagkalito, sakit, kalungkutan, takot at pagnanais na magprotesta.	Nagpapakita sila ng mga agresibo, umuurong na pag-uugali at mga pisikal na sintomas tulad ng pananakit ng ulo at pagkawala ng gana.	Sinusubukan nilang makipag-usap sa iba sa pamamagitan ng kanilang mga sintomas. Sa kasamaang palad, ito ay kadalasang hindi maunawaan.
Na-trauma na bata na walang mga sintomas	Wala silang proteksyon sa pamilya at mga seguridad. Itinuring nila ang kanilang sarili bilang mga matatanda.	Mas nakakaramdam sila ng pagod kaysa agresibo, mas maaasahan kaysa sa umuurong. Nakaramdam din sila ng pagkalito	Wala silang ipinapahayag na mga medikal na karamdaman. Nagpapakita sila ng makasariling pag-uugali.	Hindi nila kayang ipakita sa labas ang kanilang tunay na nararamdaman, iniisip at emosyon.

Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 133-43.

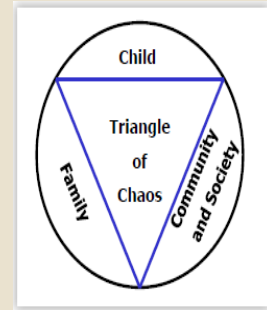
Emosyonal na Kalusugan ng mga Bata

- Mga Batang Malusog sa Emosyonal: Direkta at tapat silang nagpapahayag.
- Malusog na Bata sa Digmaan: Nagpapahayag sila ng galit, kalungkutan, at takot
- Isang Na-trauma na bata na may mga sintomas: Nagpapakita sila ng mga agresibo, umuurong na pag-uugali at mga pisikal na sintomas tulad ng pananakit ng ulo at pagkawala ng gana.
- Isang Na-trauma na bata na walang sintomas: Hindi sila nagpapahayag ng mga medikal na karamdaman. Nagpapakita sila ng makasariling pag-uugali.

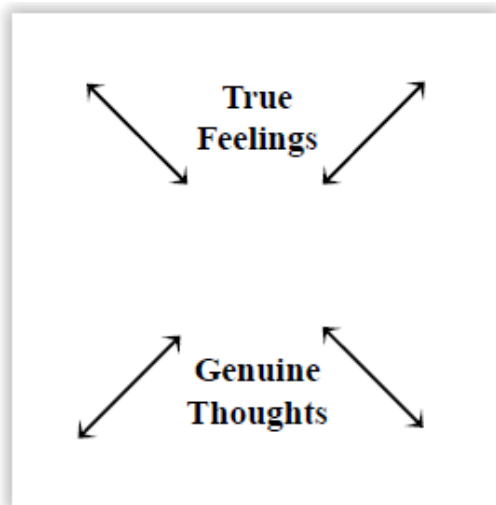
Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 133-43.

Ang Kaguluhan Ng Mga Bata Sa Digmaan.

- Ang isang bahagi ng tatsulok ay ang kaguluhan sa digmaan na kung saan sila ay nalilito at hindi naiintindihan kung ano ang digmaan.
- Pangalawang bahagi ng tatsulok ay kaguluhan sa pamilya kung saan nakakaramdam sila ng matinding pagkabigo sa kanilang mga magulang, iniisip na ang mga magulang ay masyadong walang lakas upang protektahan sila, at pati na rin takot at pagkabalisa tungkol sa pagkawala ng kanilang mga magulang.
- Pangatlo ay ang kaguluhan sa komunidad at lipunan na nagdudulot sa kanila ng kakaibang sitwasyon na walang pamilyar na istruktura ng komunidad.



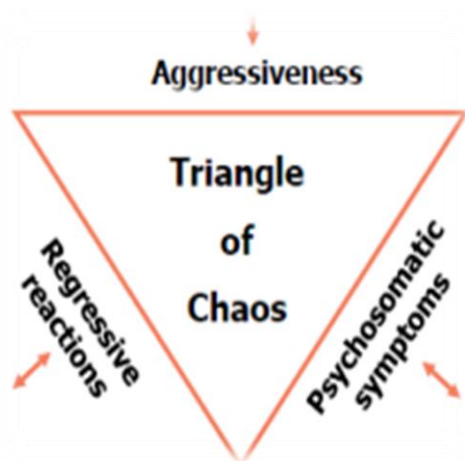
Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 139-40.



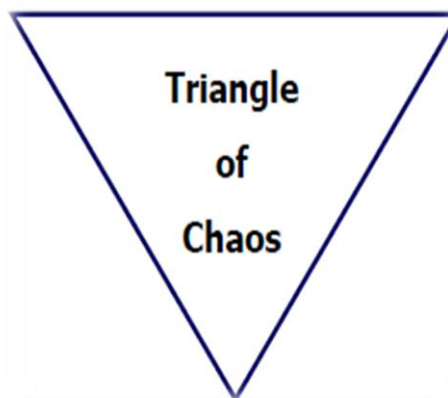
Batang Malusog sa Emosyonal



Na-Trauma ngunit Malusog



Na-Trauma na Bata na may Sintomas



Na-Trauma na Bata na Walang Sintomas

<Excerpt from the Textbook 'Offering Healing and Hope for Children in Crisis' of CCTI>

Phyllis Kilbourn, "An Introduction to the Stop Sign Model," in *Healing the Children of War: A Handbook for Children Who Have Suffered Deep Traumas*, ed. Phyllis Kilbourn (Monrovia, CA: World Vision, 1995), 133-43.

Tatlong Presentation Slides para sa Pagpapalaki sa mga Nagdadalamhating Kabataan

	Pagsusuri
Mga Bata na nasa Panganib	Mga Bata sa Ukraine
Kanilang Sitwasyon	
Panganib ng mga bata sa Ukraine	Ilista ang mga posibleng panganib ng mga bata sa Ukraine
Inaasahang Uri ng Kanilang Emosyonal na Tatsulok	Gumuhit ng isang uri ng tatsulok ayon sa iyong inaasahan
Planong Gagawin	Ano ang maaari nating gawin para sa kanila?

Isang Sagutang Papel para sa Pagpapatupad na Gawain

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