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Parent Education in Hong Kong and Implications for Paediatricians

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Abstract

Paediatricians are one of parents' most often consulted and best-trusted professionals. Close connections with parents make paediatricians vital in promoting and delivering parent education. This paper presents reflections on the nature and scope of parent education, and discusses the current state and future directions of parent education in Hong Kong. It is recognised that paediatricians in Hong Kong have been active in parent education on macro, meso, and micro levels. In view of rapidly changing social contexts, the need for paediatricians to be even better equipped with attitudes, knowledge and skills to render holistic care to children and families, especially the vulnerable and hard-to-engage ones, are discussed.

Keywords: Clinical practice; Paediatricians; Parent education; Professional training

Introduction

Most parents assume that given their own up-bringing experience, they can assume parenting roles very naturally. More open-minded and progressive parents might consult respectable friends or successful parents in their social circles for advancement of child management skills. However, at different stages of their children's development, parents invariably encounter very different stressors arising from themselves, their children or the environment, which make them feel stressed if not disheartened, bewildered or depressed.¹ There is also a growing body of literature^{2,3} which points towards changing conceptualisations in child development (from static and universally valid to dynamic and culturally specific), parent-child relationship (from parent-oriented to parent-child interactive) and management strategies (from manipulation of unilateral variables to the utilisation of multi-level variables).^{1,4} There were many attempts to provide parents with alternative child

management methods⁵ or attribution styles.⁶⁻⁸ Dr. James C. Dobson's *Focus on the Family* radio, television, publication and web projects and his books like *Dare to Discipline* (1970)⁹ have remained treasured references on parenting. Such efforts have reported improvements in parent-child mental health, social skills and even children's academic attainments. Consequently, the demand and supply of parent education have been established and are expanding in many societies.

The Nature and Scope of Parent Education

The history of parent education as a deliberate effort to inform and advise families to enhance individual and family well-being began in America during the child-study movements of the late 1920s.¹⁰ In their landmark book published in 1984, Pugh and De'Ath defined parent education as "a range of educational and supporting measures, which help parents and prospective parents to understand themselves and their children and enhance the relationship between them".¹¹ This definition set a sound foundation for considerations on parent education for a number of reasons. It undertook a preventive stance by including prospective parents and parents as service targets. This matches even the current trend of viewing parent education as functional on primary, secondary and tertiary preventive levels. Second, it acknowledged the usefulness of both educational and supportive strategies to help parents, thus capturing a full range of activities with demonstrated effectiveness in serving the purpose. Third, it stressed the need for self-understanding before intervention, and provided an appropriate starting point allowing for more adequate address of cultural and social diversities.

Such initiatives lead parent education to be conceptualised and operationalised along a multi-level framework and across an international platform.^{12,13} Parent education normally involves a variety of professionals and is delivered through a rich array of conventional and advanced media. The most common package comprises the following content and educational modes:

1. Primary level prevention programs involving educational activities on child development, parenting and family functioning. Examples include talks, workshops, and use of the media.
2. Secondary level prevention programs involving educational activities where parent are probed for opinions and personal experience to be used as examples in problem solving. These programs are often conducted in the group format.
3. Tertiary level prevention programs helping parents to manage challenging parenting problems, like children with mental or physical disability or emotional and behaviour problems. Normally services include a case approach supported by self-help groups with families of similar background. Other family issues like marital conflict, financial problems or health problems may be addressed on need.

Parent education has gained remarkable attention in the national policies of countries like the United States, the United Kingdom, Mainland China, Singapore, Australia and Taiwan on social and children welfare, with corresponding resource provisions in research, service infrastructure and legislative support.¹⁴

Parent Education in Hong Kong

Parenting practices in Hong Kong have been strongly influenced by Confucian ideology, and to lesser extents by Taoism and Buddhism.¹⁵ Parenting is often used interchangeably with "socialisation" as Chinese people emphasise the collective instead of the individual contexts. Many important Confucian concepts like striving to be a supreme moral person; filial piety; interpersonal harmony; good manners and the importance of educational attainments have been particularly influential on socialisation practices. Parents, senior members of the family, teachers, relatives and even neighbours are all active agents of socialisation. Such patterns of socialisation prevailed in Hong Kong until the 1970's when investigations into increasing youth problems cast questions on the need for alternative parenting practices.

In 1975, the Chinese University of Hong Kong completed a study on "Social causes of violent crime among young offenders in Hong Kong".¹⁶ The report recommended the launching of Family Life Education (FLE), comprising mainly parent education and parent-child relationship building programs, as a preventive measure to reduce juvenile delinquency. The "Program Plan on Personal Social Work Among Young People", published in 1977, proposed the development of family life education programs for the general population.¹⁷ The White Paper "Social Welfare into the 1980s" affirmed the policy of not taking parenting and socialisation practices for granted.¹⁸ It advocated that there should be proper educational input by government and non-government organisations into families to preserve family integrity and prevent threats to healthy child development.

Service Modes

By 2001, parent education in different forms and scales is extensively offered in Hong Kong by government departments, non-government organisations, schools and even private practitioners. Promotional and educational strategies are commonly employed. Promotional strategies try to cultivate public awareness on the nature and purpose on selected parenting themes through the mass media. Educational strategies aim at helping individuals acquire knowledge and skills in handling parenting and family problems at different stages of the family life. These often take the form of lectures, workshops, training courses, family camps and group activities. Educational programs normally follow the promotional programs to strengthen the targeted effects.

Target Groups

Since the inception of FLE services in the 1970s, the designated FLE target groups shifted from "the general population" in 1977, to "young people and married couples" in 1981, to "adolescents", "young adults about to marry", and "parents and parents-to-be" in 1991. In 1994, attempts to refocus social services to better meet social needs designated "married couples" as the fifth principal target group. According to the users' statistics in the four FLE teams selected for case studies in the 2001 Family Services Review conducted by the author and her consultancy team members at The University of Hong Kong, parents and adolescents were the major target groups served, while pre-marital couples and parents-to-be constituted the smallest proportion among the users. All these reflected that parent education has been and will remain a core concern in family education services.

Program Content

In 2001, a research team from the Chinese University of Hong Kong conducted a territory-wide review of parent education in Hong Kong. In 2001, a research team from the Chinese University of Hong Kong conducted a territory-wide review of parent education in Hong Kong. Dr Esther Ho, one of the research team members, reported¹⁴ that the most commonly delivered parent education topics matched parents' expressed needs and included parenting and communications skills; knowledge on child development and behaviour; spousal relation; moral education for children; information on sex education; and strategies to improve children's academic performance. There were also special efforts made to address the needs of single parents, step parents, new arrival families, at risk families as well as families with children having behavioural or emotional

problems or handicaps.

Over the years, there were changes in the popularity of parent education topics. These reflected changes in social contexts and parenting needs. In the 1970s and 1980s, the perpetuation of traditional Chinese socialisation ideology demanded assistance on "How to bring up filial and compliant children" and "How to make children achieve". In the early 1990's, women's increasing participation in the labour force stimulated research and talks which addressed the differential roles of fathers and mothers in parenting and family affairs.¹⁹ In the late 1990's, enthusiasm to promote children's self-esteem, IQ, EQ and MQ brought corresponding enthusiasm to adjust parenting styles. At the turn of the millennium, challenges to parents' competence in terms of mastery of new knowledge and information technology attracted much attention, showing the parents' attempts to catch up with global changes and advancing technology.²⁰⁻²²

As Hong Kong parents continue to move towards raising fewer but higher quality children, parent education has become an expanding market. There are substantial demands for public services as well as resources on the media and the web. Even subscription for private practice is growing steadily despite economic recession. Research on parent-child relationship^{19,23} and parent-child well-being²⁴ is also expanding. However, parent education in Hong Kong still faces some significant challenges. The Family Service Review Report²⁵ and the Parent Education Review Reports¹⁴ both indicated that traditional cultural emphasis on recognisable achievement maintains its influence on parenting goals and cast considerable stress in parent-child relationship. Cultural inhibitions in help seeking still subtly stigmatise service users. Unfavourable economic climate, job insecurity, long and unstable working hours, and even marital relationship crises all rendered it difficult, if not impossible, for even motivated parents to attend parents education programs systematically.

In terms of service quality, it is evident that not all parent education programs in Hong Kong were theory-driven or evidence-based. Many programs were delivered on a piecemeal basis, and more systematically designed "curriculums" did not emerge until the late 1990's. The better known and more commonly-adopted theories or models included: a) Behavioural approach based on learning theories; b) Thomas Gordon's Parents Effectiveness Training (PET) (1975) advocating for democratic methods of child rearing; c) Dinkmeyer and McKay's Systematic Training for Effective Parenting package (STEP) (1976)²⁶ stressing the need to identify the goals behind children's misbehaviour; d) Harris's Transactional Analysis model (1969)²⁷ focusing on the four life positions and appropriate

levels of communication; and more recently; e) cognitive behavioural programs focusing on cognitive structuring and acquisition of new skills with new mindsets.

In terms of program effectiveness evaluation, rigorous evaluative research was seldom carried out. Feedback was often collected through users' satisfactions surveys.^{25,28} Most users reported that the programs alerted them not to take parenting for granted. Many felt less stressed after ventilating to their group members, who were often parents with similar problems. The sharing empowered many parents as it "normalised" their parenting challenges and improved their self-acceptance. Many parents found the professionals effortful in program design and delivery. If they were more systematic in evaluating their practice and publishing their programs and experience, the impacts could be more effectively and efficiently achieved. All these indicate that parent education in Hong Kong is gaining public acceptance. But professional self-enhancements and explicit government support through policy statements and resource provisions are necessary to strengthen parent education personnel, programs and research in Hong Kong.

New Millennium Parent Education and Parent Support in Hong Kong

In view of the existing needs and drawbacks in parent education, the Hong Kong government has made concrete commitments to strengthen and indigenize parent education in Hong Kong. In summer 2001, the Hong Kong government approved a budget of HK\$50 million to launch a two-year project to develop parent education to improve parenting practice. Parent education should maintain its preventive function and be positive and constructive in outlook. It should bear holistic considerations of the ecological and systems dynamics impacting on parenting, and should be relevant to the diverse and changing "Chinese" socialisation concerns.¹⁵ At risk families, hard-to-reach parents and new arrival families will be given highest priority. Optimal use will be made of some critical factors identified to be conducive to effective education. They included kindling parental commitment; promoting schools involvement, improvement of personnel quality through continuous training, as well as the development and evaluation of systematically designed programs. Sander's Triple-P program (1999),¹³ which is a well-researched Australian parent education package involving multi-disciplinary team and multi-level intervention modes of service deliver, could be used as the main reference.

Aside from creating indigenous parent education

programs to support parents, improve parenting practices, and preserve family integrity in Hong Kong, other local developments towards the same goal have been in force. The Social Welfare Department committed to implement the recommendations of the Family Service Review Report.²⁵ Child-centered, family-focused and community-based strategies will be used in Integrative Family Service Centers to strengthen Hong Kong families to meet changing social challenges. Family services will be made more responsive, flexible, sensitive and effective through four service delivery principles: accessibility; early identification of needs; integration of services and partnership with other programs and professionals. Active interfacing amongst government departments and different professionals will be enforced to provide a close-knit support to parents and families. Trans-disciplinary services like those offered in Child Assessment Centers, Student Health Clinics as well as Family and Child Protection Service Units will be expanded to offer timely and convenient services to users. There will also be evaluative efforts to establish service effectiveness and continuous training to ensure service quality.

The Role of Paediatricians in Parent Education in Hong Kong

In the context of working with parents, paediatricians occupy strategic positions because they are one of the most frequently visited professionals when parents have young children. Children and maternity health needs require even the most passive parents to make regular visits to paediatricians. Such parents will be keen to seek special consultations even from private practitioners should their children face more serious health challenges. The careful selection process, and the eagerness for help make the parents very susceptible to professional education and influence. Paediatricians are the recognised to have obvious roles in prevention, early identification and management of parenting and children problems.²⁹

In Hong Kong, paediatricians are reputable in the advancement of their research and professional knowledge and skills. Their contributions to public health education are also evident on macro, meso and micro levels. On the macro level, paediatricians have a long history of sharing their professional wisdom on the media. Many paediatricians run television and radio programs, contribute to newspaper health columns, launch systematic courses in children health, and even compose songs for children and parents to put forward public health messages. Paediatricians have powerfully argued for improvements in children and family

service policies, like establishing infant screening and student health services.

On the meso level, paediatricians have engineered organisational changes to establish client-oriented service deliver modes. Since the early 1980's, the multi-disciplinary team design pioneered by Child Assessment services, and the improvement in the physical setup and social administration of paediatric wards have benefited many children and families. Paediatricians were ready for trans-disciplinary cooperation and enthusiastic in mobilising parental involvement in children rehabilitation. These have successfully transformed many families with need into self-help groups and even social resources competent in rendering emotional and tangible support to similar families. In the late 1990's, successful networking between some family service centers and maternity and childcare centers enabled professionals and service users to enjoy integrative service support. Projects to provide paediatric input in school sex education, premarital counseling and family planning are underway. Paediatricians' continuous concern over service referral, service continuity and case management has been valuable contributions in the primary, secondary and tertiary levels of promoting children and family welfare.

While paediatricians can work through their administration, professional organisations or voluntary bodies to enhance the welfare of children and their parents, the less obvious but most significant impact on individual families is the paediatricians' direct contact with the service users. They are at the forefront as parent and family educators to perform roles like problem detector, educator, enabler, motivator for help-seeking, referrer, and even monitor for appropriate use of social services. At the preventive stage, paediatricians can motivate parents for better understanding of child and personal development. This helps to cultivate appropriate expectations and activates coping preparation as parenting is a life-long process. At the secondary prevention level, paediatricians who are sensitive to the holistic condition of the children and families at hand can be early detectors of child and family needs. Paediatricians' early detection of children's specific learning disabilities or giftedness can become convincing referrers in connecting the families of need to relevant social services. Paediatricians who visit special childcare centers regularly to provide on-site consultation are invaluable in helping the parents to accept their special child. The empathetic understanding and appreciative recognitions from the paediatricians were often equally, if not more, therapeutic than the drugs they prescribed. Even in challenging cases like family violence, there is evidence that sincere empathy and tactful clinical manner can develop the abusers' problem

ownership and make the family amenable to more timely help.^{30,31}

Since the late 1990s', Hong Kong has been facing great social and economic challenges like soaring unemployment rate, massive population movements and declining family solidarity. How to better support families to bring up competent and responsible new generations has become a matter of general concern. Along with the government's determination to improve inter-departmental interfacing, trans-discipline cooperation and service integration, paediatricians have to be better prepared than before in terms of attitude and skills to work with people from different walks of life. In addition, they have to be more alert to changing modes of social service so that they are knowledgeable in making appropriate and timely referrals for families in need. A participatory role in such services will definitely foster positive connections. Paediatricians can serve as honorary medical consultants of kindergartens, primary schools, family education projects and integrative family service centers to make themselves more visible as community resources. They should also be even better tuned in the ideology of holistic patient care. Since 1998, the University of Hong Kong Medical School adopted problem-based learning (PBL) in pre-clinical training to better equip medical students with the knowledge and skills to approach patients in context. It is expected that the continuous education scheme of the profession will ensure that experienced paediatricians are also systematically stimulated along the same line.

Conclusion

A society's future rests on the quality of its children. Parents are important agents in bringing up their children to be quality citizens. Rapid socio-economic and technological changes have made effective parenting an increasingly challenging task. Parents in contemporary Hong Kong are more aware of and receptive to resources helpful to them and their children to better manage growth challenges and family dynamics. This paper attempts to summarise the rationale and nature of parent education, and outline the history and future development of parent education of Hong Kong. The long-term contributions of paediatricians in supporting parents are recognised and discussed in the context of parent education. It is hoped that paediatricians can take note of changing social circumstances and services, be well equipped in attitude, knowledge and skills to continue to promote the well being of children, parents and families in Hong Kong.

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