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Examining the Efficacy of Psycho-Educational Program for Mothers on Mothers' Perception of Child **Education Competence**

Annelere Yönelik Psiko-Eğitim Programının Annelerin Çocuk Eğitimi Yeterlik Algılarına Etkisinin İncelenmesi

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Abstract: Though parental efficacy is emphasized in much admirable research, very few social programs have been assessed. Parenting is a potential protective or risk factor for the development of the child and predicts outcomes related to the child's developmental processes. In this study, the effect of a psychoeducation program on the childhood education efficacy perceptions of mothers was examined. The study is a quasi-experimental design with a pre-test and post-test control group. 20 mothers with primary school children residing in Turkey, 10 in the experimental group and 10 in the control group, participated in the research. Each mother in the experiment group completed a psychoeducation program comprising 10 sessions lasting 50 minutes. Prior to the psycho-education, it was determined that there was no significant difference between the scores of the experimental and control groups obtained from the Child Education Efficiency Scale (CEES) as well as the Bringing Responsibility, Communication-Interaction, Knowing the Child, Developing the Child, and Guiding the Child subscales. The result of the research revealed that the experimental group had significantly higher scores for the Child Education Efficiency Scale and all subscales after receiving psychoeducation compared to before the training. On the other hand, there was no significant difference between the scores of the control group from the CEES or any subscales before and after psychoeducation. In addition, after psychoeducation, the scores of the experimental group were significantly higher for the CEES and Bringing Responsibility, Communication-Interaction, and Developing the Child subscales compared to the control group. There was no significant difference in the Guiding the Child, Knowing the Child subscales. The results indicate that the efficacy levels of mothers can be increased and explain the probable mechanisms that may affect efficacy.

Keywords: Maternal education, psychoeducation, perception of efficacy, self-efficacy, experimental study

Oz: Ebeveyn yeterliğini takdir araştırmalarla vurgulanan bir olgu olsa da bu konuda az sayıda topluluk programı değerlendirilmiştir. Oysa ebeveynlik, çocuğun gelişiminde önemli bir faktördür ve çocukların gelişimsel süreçleriyle ilgili sonuçları öngörmektedir. Bu araştırmada annelere yönelik psiko-eğitim programının, annelerin çocuk eğitimi yeterlilik algısına etkisi incelenmiştir. Bu kapsamda gerçekleştirilen çalışmada ön-test son-test kontrol gruplu yarı deneysel desen kullanılmıştır. Araştırmaya deney grubunda 10, kontrol grubunda 10 olmak üzere Türkiye'de ikamet eden, ilkokul çocuğuna sahip 20 anne katılmıştır. Deney grubundaki annelere her biri 50 dakika süren 10 oturumdan oluşan psiko-eğitim programı uygulanmıştır. Psiko-eğitim çalışmasından önce deney ve kontrol grubunun Çocuk Eğitimi Yeterliği Ölçeği (ÇEYÖ) ve ölçeğin sorumluluk kazandırma, iletişim-etkileşim, çocuğu tanıma, çocuğu geliştirme ve çocuğu yönlendirme alt boyutlarından aldıkları puanlar arasında anlamlı bir farklılık olmadığı saptanmıştır. Araştırma sonucunda deney grubunun psiko-eğitimden sonra aldıkları ÇEYÖ ve ölçeğin alt boyut puanlarının tamamı, psiko-eğitimden önce aldıkları puanlara göre anlamlı düzeyde yüksek bulunmuştur. Kontrol grubunun ise psiko-eğitimden önce ve sonra ÇEYÖ ve sorumluluk kazandırma, iletişim-etkileşim, çocuğu tanıma, çocuğu geliştirme, çocuğu yönlendirme alt boyutlarından aldıkları puanlar arasında anlamlı bir farklılık olmadığı saptanmıştır. Ek olarak psiko-eğitimden sonra deney grubunun kontrol grubuna göre ÇEYÖ ve sorumluluk kazandırma, iletişim-etkileşim, çocuğu geliştirme alt boyutlarından aldıkları puanların anlamlı düzeyde daha yüksek olduğu, çocuğu yönlendirme, çocuğu tanıma alt boyutlarında ise anlamlı bir farklılığın olmadığı saptanmıştır. Çalışmanın sonuçları, annelerin yeterlik düzeylerinin arttırılabileceğini ortaya koymakta ve yeterlik üzerinde etkili olabilecek muhtemel mekanizmaları açıklamaktadır.

Anahtar Kelimeler: Anne eğitimi, psiko-eğitim, yeterlik algısı, özyeterlik, deneysel çalışma

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Introduction

The association between parenting approaches and the child's developmental processes forms a broad-scale topic of investigation. Positive parenting is defined as an approach supporting the social and psychological development of children; negative parenting, on the other hand, is considered a significant risk factor due to its negative effects on these developmental areas (Dallaire et al., 2006; Yang et al., 2023). Research provides much evidence that negative parenting may be associated with internalized and externalized behavior like anxiety, depression (Clayborne, 2021; Smokowski et al., 2015), aggression, and overreactions (Dishion & Patterson, 2006; Snyder et al., 2005) in children. Additionally, studies obtained results about the negative effects of negative parenting on the brain (Jiang et al., 2011). However, research also reported a negative correlation between positive parenting with internalized and externalized behaviors (Barrera et al., 2002; Boeldt et al., 2012) and associations with high selfesteem and optimism about the future (Smokowski et al., 2015). The studies have drawn attention to the association between parenting and children's developmental processes as well as emphasized that parental competence, which includes the knowledge, skills, and attitudes necessary to support children's development, possesses a significant role in exhibiting positive parenting traits (Coleman & Karraker, 1998; Hamovitch, 2019). While studies have drawn attention to the connections between parenting and the child's developmental processes in this way, they emphasized that those with high parental efficacy may display positive parenting features (Coleman & Karraker, 1998; Hamovitch, 2019). Studies with the purpose of decreasing the impact of risk factors while increasing the effect of protective factors encourage positive parenting (Rodrigo et al., 2012) and point out that more studies should be conducted regarding parental competence (Amin et al., 2018; Zorbaz, 2018) so that the effectiveness of intervention programs can be significantly increased. Though several studies revealed promising results concerning developing parental efficacy with intervention programs, they are inconsistent (Ruiz-Zaldibar et al., 2018; Sarabi, 2011), and more studies are required about this topic (Enebrink et al., 2015). In addition to all of this, studies advocate the opinion that the child education efficacy of parents, especially of mothers, is significant for the child's education and development (Lara & de los Pinos, 2016). Education level of mothers, parenting approaches, and the emotional support they provide have a direct impact on children's cognitive, social, and emotional development (Miller, 2008; Santrock, 2015). Research has shown that the safe and supportive environment provided by mothers assists children in developing a sense of self-esteem and having positive experiences in their social relationships (Coleman & Karraker, 2000; D'Aoust, 2008); besides, mothers' attitudes and behaviors towards their children play a decisive role in their academic achievement and social adaptation (Santos et al., 2013; Tezel Sahin, 2014). Furthermore, mothers' tendency to spend more time in the care of children and to provide emotional support from their early years reinforces these findings (Kılıçaslan, 2007; Shahraki et al., 2016). Therefore, this fact reveals that the competence of mothers in child education becomes a primary subject as a determining factor in the general development of children as well as indicates the importance of studies to be conducted on this theme (Kim and Moon, 2005). However, it was revealed that studies about this topic are limited in Türkiye and need to be expanded (Yeşil et al., 2018; Aksüt, 2022). Based on these results, a psychoeducation program developed and implemented to increase child education efficacy perceptions of mothers will contribute to filling this gap and drawing attention to protective factors. In this regard, the purpose of the study was to investigate the effect of a psychoeducation program for mothers on the child education efficacy perceptions of mothers. The framework for the theoretical-based approach for the development of the program with this target is presented below.

Theoretical Background

Self-efficacy is a belief of people concerning their capability to be able to complete any work or tasks expected of them and their skills related to this (Bandura, 1977). Social learning theory explains self-efficacy as it reveals the individual's potential to mobilize for the stated task, the effort they will expend for the duty, and the duration they will work despite obstacles (Bandura, 1995). When self-efficacy overlaps with outcome expectations, the action and effort expended by the individual will increase to the degree to which they trust their own efficacy (Bandura & Schunk, 1981). Bandura (1993) proposed that self-efficacy functions as a mediator between belief, information, and implementation.

From the view of Bandura's social learning theory (Bandura, 1994, 1999), self-efficacy is supported by four basic

sources of information. Among these information sources, successful experiences are based on the individual's real experiences and have a clear and strong effect on mastery expectations. Indirect experience includes watching activities completed by others and may be correlated with the mastery capacity of the observer. Verbal persuasion represents verbal feedback emerging from others regarding the individual's potential for success. Physiological and emotional stimuli are the final source of information ensuring the emergence of selfefficacy beliefs. For this information source, aversive physiological stimuli may be associated with the individual's expectations of failure, while fewer of these stimuli may be associated with expectations of success. In addition to all of this, contextual factors such as the four psychosocial processes of cognitive process, affect process, chosen process, and motivation status, and the social, situational, and temporal conditions in which the event occurs, affect self-efficacy. As these factors and the intervening assessment processes are complicated and interrelated with each other, it was noted that self-efficacy is a variable construct, not a fixed construct (Bandura, 2012; Jones & Prinz, 2005).

Bandura (1986, 1997) asserted that self-efficacy possessed three dimensions, which are magnitude, strength, and generality, based on social learning theory. Magnitude is predictions related to the difficulty the individual will have in succeeding at the task. If the person thinks the task is very difficult, they may give up on making the effort. The strength dimension is a measure of the person's trust in themselves in succeeding at the task. People with successful experiences may trust themselves when they need to complete the same task again. Generality represents the individual being able to transfer their successful experiences to others. If a person can generalize their successful experiences to others, they are thought to have high self-efficacy (Coleman & Karraker, 1998).

The concept of self-efficacy in Social Learning Theory was found to be closely associated with parental competence; hence the effects of parents' experiences in child-rearing processes on their children's development as well as their perceptions of self-efficacy were investigated (McMahon et al., 1981; Miller & Prinz, 1990; O'Connor et al., 2013; Scott & Dadds, 2009; Shaffer et al., 2009; Snyder et al., 2013). Based on this conceptual background, definitions, practices, and research have been completed about parenting efficacy (Aksüt, 2022; Bağatarhan & Nazlı, 2013; McCoy et al., 2020). In this context, Teti and Gelfand (1991) defined parenting selfefficacy as beliefs regarding the capability and skill of parents in their parenting role. Coleman and Karraker (1998) proposed that there were a range of requirements for parents to feel adequate, when self-efficacy is applied to the field of parenting based on social learning theory. They stated that for parents to feel adequate they need to believe that they have information about interventions related to appropriate child care, trust their abilities to be able to apply this information successfully, and that their children appreciate these efforts; moreover, other people will encourage these efforts. In a study based on social learning theory, Morelli et al. (2020) discovered that the correlation between psychological distress in parents and a child's emotional regulation and variability/negativity was influenced by parenting self-efficacy and parental regulative emotional self-efficacy. They suggested that parental confidence in managing parenting responsibilities could act as a protective factor for the emotional health of the child.

Bandura (1997) stated that efficacy beliefs of parents are an important basis for parenting practices. In fact, studies revealed that high efficacy levels of parents will ensure they make more effort (Bandura, 1997), support the growth environment for a healthy child (Kılıçaslan, 2007), positively affect the parent-child adjustment (Jones & Prinz, 2005), support the child's health and development (Coleman & Karraker, 2003; Sari & Altay, 2020; Takács et al., 2019), positively affect the mother's sensitivity level (Leerkes & Crockenberg, 2002), and reduce depressive symptoms and stress levels in the mother (Bloomfield & Kendall, 2012; Takács et al., 2019). To illustrate, in a study researching the correlation between parental stress with parenting efficacy and parenting behavior of mothers with small children, Kim and Moon (2005) found parenting efficacy and parenting stress significantly correlated with parenting behavior, and the mother's parenting efficacy mediated the correlation between parenting stress and parenting behavior of the mother. Consequently, the research results found correlations between parenting efficacy with psychological health of parents (Bloomfield & Kendall, 2012; Lavende & Kestler-Peleg, 2017; Teti et al., 1996), positive parenting behavior (Gartstein & Iverson, 2014; Teti & Candelaria, 2002), and the cognitive (Coleman & Karraker, 2003), emotional (Weaver et al., 2008), physiological (Leerkes & Crockenberg, 2002), and social (Aydoğdu et al., 2021) development of the child. Additionally, several studies noted parenting efficacy as a construct that may vary according to environmental, personal, and behavioral factors (Bandura, 2012; Jones & Prinz, 2005), and current experimental studies offered evidence that it may be increased (Mouton & Roskam, 2015; Sofronoff & Farbotko, 2002). For this reason, parenting efficacy, being a variable, enhanceable, and increasable construct, attracts attention to the potential role of parent education in increasing parental efficacy.

Parental education refers to educational interventions designed to assist parents in altering their interactions with their children to discourage adverse child behavior (Croake & Glover, 1977). Studies about child education of parents, especially mothers, revealed this education contributed to reducing behavior problems in their children (Scott & Dadds, 2009), developing positive identity (Karaırmak et al., 2016), ensuring educational rights (Oktaria & Putra, 2020), and psychological well-being (Jones & Prinz, 2005). Additionally, studies found that parent education had positive effects on parenting skills (Lara & de los Pinos, 2016) and parental efficacy (Bloomfield & Kendall, 2012; Enebrink et al., 2015) of parents. For instance, Bradley et al. (2003) performed a randomized controlled assessment of a four-session psychoeducation group offered in public institutions for mothers and fathers of preschool children with behavior issues. The research revealed a substantial improvement in parenting practices among participants who received the intervention, resulting in a notable decrease in their children's negative behaviors compared to those in the control group. Bloomfield and Kendall (2012) discovered an association between parental self-efficacy and stress experienced by parents in research that explored the influence of a parenting program on parental self-efficacy, stress levels, and alteration in child behavior. The study finding suggests that increased parenting self-efficacy is correlated with decreased stress levels.

The outcomes of both parent education programs and interventions about parenting efficacy are promising in the literature (Ruiz-Zaldibar et al., 2018). Though studies stated that parenting efficacy is a changeable construct affected by

many variables (Bandura, 2012; Jones & Prinz, 2005), there is a need for additional studies based on a robust theoretical framework to be able to sufficiently understand this construct. In addition to this, studies support the view that adequate child education of parents, especially mothers, is important for the child's education and development (Lara & de los Pinos, 2016). Because mothers' perceptions of competence form the cornerstones of child-rearing practices. Research has shown that the safe and supportive environment provided by mothers assists children in developing a sense of self-esteem and having positive experiences in their social relationships (Coleman & Karraker, 2000; D'Aoust, 2008), as well as that mothers' attitudes and behaviors towards their children play a decisive role in their academic achievement and social adaptation (Santos et al., 2013; Tezel Sahin, 2014). Mothers with a high level of competence contribute positively to their children's development processes by allocating more time to them (Kılıçaslan, 2007). These mothers not only strive to ensure that their children grow up in a healthy environment but also encourage positive parenting behaviors (Coleman & Karraker, 1998; Hamovitch et al., 2019). In this context, increasing the competence levels of mothers is critical both for their own psychological health and for the development of their children (Miller, 2008). Therefore, supportive programs for mothers are regarded as an important element in shaping the future of children (Kim and Moon, 2005). However, it was noted that the studies on this topic in Türkiye are limited and more studies are required (Aksüt, 2022). It was emphasized that studies, especially education-focused experimental studies, were so few as to be non-existent (Yeşil et al., 2018). In this study, the aim was to contribute to resolving this gap and comprehending this construct by focusing on increasing the child education efficacy of mothers.

Present Study

Based on social learning theory, one of the features required by parents to be able to feel they are adequate in terms of parenting is to have sufficient levels of information about child care (Coleman & Karraker, 1998). Intervention studies revealed that programs for parents lead to an increase in the self-efficacy of parents (Adamson et al., 2013; Morawska et al., 2014). In addition, studies emphasize that parenting selfefficacy is associated with mothers' level of knowledge on child development (Hess et al., 2004), that child education competencies of mothers are vital for their children's social, emotional, and cognitive development (Santrock, 2015), and that supportive programs for mothers play a decisive role in forming the future of children (Kim and Moon, 2005). For this reason, this psychoeducation program, prepared based on social learning theory, is expected to increase efficacy levels by contributing to the information about child education of mothers. All of this will provide the opportunity to understand this construct and to become aware of protective factors. In conclusion, the objective of this research was to investigate how a psychoeducation program for mothers influences mothers' perceptions of their efficacy in educating their children. The following hypotheses were tested in the study: (H_1) the post-test scores of mothers in the experiment group participating in the psychoeducation program will be higher by a statistically significant level compared to the control group; (H_2) the post-test scores of mothers in the experiment group participating in the psychoeducation program will be higher by a statistically significant level compared to their pre-test scores; and (H_3) pre-test and post-test scores of mothers in the control group will not significantly differ.

Method

Research Model

In this study, a pretest-posttest controlled, semi-experimental pattern was utilized. Besides a 2x2 split plot pattern with the first factor defined as two separate groups (experiment-control) was utilized while the second factor was two separate processes (pretest-posttest) (Büyüköztürk, 2010). The research model can be observed in Table 1.

Table 1. Research model

Group	Pre-test	Procedure	Post-test	
Experiment	CEES	Psychoeducation program	CEES	
Control	CEES		CEES	

Note. CEES: Child Education Efficiency Scale

Study Group in the Research

The study group comprised 20 volunteer people residing in Konya. The participants were determined by the convenience sampling method; 10 of them were in the experimental group, and 10 of them were in the control group.

The experiment and control groups were selected from mothers of students attending primary education in a state school based on volunteering. The personal information form (PIF) and the CEES were applied to all 47 mothers who volunteered. Following the scale, the scores for each mother were calculated and ranked. The analysis of scale scores was based on psychometric features. The experiment and control groups were determined by random allocation of those with scores below 50 out of 100 (assessed as inadequate and very inadequate). Finally, 10 mothers were included in each group.

Inclusion criteria were considered when determining the experiment and control groups. Inclusion criteria were volunteering for the study, not using medication, and having no diagnosis. Additionally, an important point is to control for possible effects of confounding factors not researched but affecting the dependent variable in experimental studies. As a result, a control group equivalent to the experiment group was formed to remove this risk from the study (Ulaşan, 2018). In the research, the numbers of mothers included in the experiment and control groups were equal; they were at least primary school graduates, were in the development period of young adulthood, were married for at least seven years, and were not employed.

Table 2 shows the demographic information of mothers in both groups. The mean age of mothers in the experiment group was 32.5 years. Of mothers, 60% were primary education graduates, and 40% were secondary education graduates. Of mothers, 30% had one child, 40% had two children, and 30% had three children. Of the mothers, 70% were married for 7-10 years, and 30% were married 10-15 years. Mothers included in the experiment group were not employed.

The mean age of mothers in the control group was 33.3 years. Of mothers, 60% were primary education graduates and 40% were secondary education graduates. Of mothers, 30% had one child, 50% had two children, and 20% had three children. Of mothers, 40% were married for 7-10 years, and 60% were married for 10-15 years. No mother in the control group was employed.

Examining mothers in the experiment and control groups for significant differences between them initially to identify suitability for the research, mothers in both groups were equivalent in terms of pre-test scores prior to the experimental intervention, and they were assessed as abiding by the preconditions for the experimental intervention.

Development and Implementation of Psychoeducation Program for Mothers

Psychoeducation programs target the development of skills to both cope with current problems and to prevent the emergence of problems. Additionally, the aim is that individuals interact and learn from each other with information-based teaching (Brown, 1998; 2004; Geroski & Kraus, 2002). In this psychoeducation program developed for mothers, the objective was to develop their child education-related skills and thus to increase their child education efficacy perceptions.

Preparing a psychoeducation program requires good planning and conducting needs analysis studies and literature reviews (DeLucia-Waack, 2006). In this context, in order to develop a psychoeducation program for mothers, publications on the development and implementation of psychoeducation programs, Family Education Programs, studies for families and mothers, group sessions, and related literature are benefited together with the topics determined following the needs analysis studies (Akosmanoğlu, 2023; Bandura, 1977, 1994, 1999; Bağatarhan & Nazlı, 2013; Brown, 2004; Coleman & Karraker, 1998; Güçray et al., 2009; DeLucia-Waack, 2006; Faber & Mazlish, 2023; Mackenzie, 2000; Lightning, 2017; Green et al., 2018; Yildirim, 2018). The subscales of the CEES of giving responsibility (GR), communication-interaction (CI), knowing the child (KC), developing the child (DC), and guiding the child (GC) were considered. The social learning theory was regarded as the basis. Within the framework of Social Learning Theory, the four basic sources of information of the concept of selfefficacy were considered in the program aimed at improving the child education competencies of mothers. In the program, it was aimed to enhance individuals' perceptions of selfefficacy through activities reinforcing their success experiences. In addition, with indirect experience, participants were allowed to assess their own skill capacities by drawing on each other's experiences. Through verbal persuasion strategies, expert opinions, and group discussions, participants were provided encouraging feedback enabling them to realize their parenting potential. At the point of managing emotional and physiological stimuli, anxiety management and stress coping strategies were applied. In addition, the participating mothers had an opportunity to observe each other's experiences with the modeling method. The activities aimed at improving mothers' self-efficacy perception (e.g., I know my child) were the focus of the program. Thus, it was aimed to enable mothers to discover the developmental characteristics of their children, as well as to reinforce their self-efficacy beliefs. Through drama activities performed in order to improve effective communication skills, both increasing the self-confidence of the participants and establishing a healthier interaction with their children was the main purpose. Besides, positive reinforcement methods were included in the program to enhance the strengthening of mothers' perceptions of selfefficacy by highlighting and celebrating their achievements. Through group discussions and practice sessions, participants shared their experiences and activated social support mechanisms. Thus, in the design of the program, systematic approaches based on social learning theory and the concept of self-efficacy were used. Through creating an effective structure to increase the child education competencies of mothers, it was aimed to ensure that the knowledge gained by the participants was applied and reinforced in practice and to create lasting effects on the development of parenting skills.

Table 2. Demographic information

Variables		Experiment group (f)	Experiment group (%)	Control group (f)	Control group (%)
Mother's age	25-30 years	3	30	2	20
	31-35 years	5	50	5	50
	36-40 years	2	20	3	30
Mother's	Primary education	6	60	6	60
educational status	Middle education	4	40	4	40
Number of children	1	3	30	3	30
	2	4	40	5	50
	3	3	30	2	20
Duration of	7-10 years	7	70	4	40
marriage	10-15 years	3	30	6	60
Mother's	Employed	0	0	0	0
employment status	Unemployed	10	100	10	100

Expertise is required to manage psychoeducation groups. The aim of the leader is not just to present information to the group. The leader must also facilitate personal learning and be supportive of group members expressing themselves and their emotions. They must encourage new learning practices and create the environment and opportunities for this (Brown, 2004). They must focus on the skills that are to be acquired. In this context, role-play and socio-drama methods, the empty chair technique, and example cases should be used in sessions, and homework should be given. Sessions may assist in participants being able to develop life and communication skills, unearth problems, and develop appropriate skills (Furr, 2000). In addition, provided that the first session introduces group members and is a preparatory session, it may assist in reducing the anxiety of group members. Participation in sessions by group members should be increased, and they should be given the opportunity to open up about their feelings in a comfortable way (Yalom & Leszcz, 2005). At the same time, rules should be determined in the first session, and the final session should be a termination (DeLucia-Waack, 2006). In the developed psychoeducation program, introductory activities and the creation of group rules were included in the first session, while the final session was the termination. In addition to teaching information, dramatization studies, group discussions, brainstorming, example practices, stabilization techniques, and a variety of activities were included in the program. The requirement of sharing and practice in each session was considered.

Though the number and duration of psychoeducation sessions may differ linked to time and the development period of the participants, psychoeducation comprises an average of 6 to 20 sessions (Güçray et al., 2009). It is generally appropriate to perform psychoeducation sessions once per week. The frequency of the sessions may vary according to the target of the group, the status of participants and their circumstances (Brown, 2004). In this context, this psychoeducation program for mothers developed, comprising 10 sessions with one session per week, and each session is structured to last 50 minutes. The psychoeducation program was presented to two experts who are specialized in the field of Guidance and Psychological Counseling as well as experienced in the development processes of psychoeducation programs. Following the opinions received and the preliminary application (it consisted of 10 sessions, lasted 10 weeks, and was conducted with 10 mothers), the required revisions were made, and the program, consisting of 10 sessions, was finalized. In the first session of the implemented program, the participants socialized with each other through the meeting activity, received information on the content of the program, and group rules were created. With the "Who am I?" activity, mothers discovered their identities by introducing themselves. In the second session, the social, emotional, cognitive, and physical development characteristics of the 7-11 age period were discussed, and mothers were enabled to develop awareness regarding their children with the "I know my child" activity, which was used in other sessions to encourage these awareness-raising activities. In this session, mothers discussed the resources of their children. In the third session, topics such as effective communication, active listening, and giving feedback were shared with the child, and mothers improved their communication skills by dramatizing child-mother roles. In the fourth session, parental attitudes (authoritarian, overly permissive, overprotective, democratic) and sibling relationships were lectured. At this point, the mothers' shares and opinions were also included. In the fifth session, the issue of anxiety in children was discussed; concerns were expressed with the "My Anxiety Story" activity, and mothers were encouraged to discover their own calming methods with the "My Calming Window" study. In addition, mothers expressed the methods their children use to calm down. In the sixth session, the concept of privacy in children was emphasized; With the "Creating a Picture of Trust" activity, the sense of trust was reinforced, and painting privacy-related activities were carried out. In the seventh session, strategies for giving children responsibility were discussed, and responsibilities were determined with the "My Responsibility Chart" activity. In the eighth session, the concept of boundaries in children was discussed; "Border training and border map" activities were carried out. In the ninth session, participants were lectured on the use of screens for children; the effects of screen use in terms of communication, anxiety, privacy, and boundaries were evaluated, and the topics were reinforced with collage work. In the tenth session, following the general evaluation of the program, "Good wishes" were applied with the participants and the post-tests were applied. The content of the 10 sessions is shown in Table 3 in brief.

Data Collection Tools

Personal Information Form (PIF)

The PIF was employed for demographic information of mothers. The PIF included questions regarding the age, educational status, number of children, marriage duration, as well as employment status of mothers.

Table 3. Content of the psychoeducation program

Sessions	Content
1	Introduction activities
	Describing content of the program
	Creating group rules
	Who am I activity
2	7-11 year development period features
	I know my child
	My child and resources
3	Information about effective communication
	with the child
	Dramatization of communication with the
	child
4	Parental attitudes
	Sibling relationships
	Example applications
5	Anxiety in children
	The story of my anxiety activity
	My calming window
6	Privacy of children
	Creating a safe picture activity
	Privacy coloring study
7	Giving the child responsibility
	My responsibility timeline
8	Boundaries in children
	Boundary education and boundary map
	study
9	Use of screens by children
	Communication with children and screens
	Anxiety in children and screens
	Privacy of children and screens
	Boundaries of children and screens
	Collage study
10	Assessment
	Good wishes implementation
	Posttest application

Child Education Efficiency Scale (CEES)

This scale was developed by Yeşil, Aslanderen and Sahan (2018) with the aim of determining perceptions of parents on child education efficacy. The scale is based on self-assessment and comprises 37 items (e.g., "I can explain my thoughts in a way my child will understand"). The scale involves the following subscales: Bringing Responsibility Communication-Interaction (CI), Knowing the Child (KC), Developing the Child (DC), Guiding the Child (GC). 5-point likert scale rating—Never (0), Rarely (1), Sometimes (2), Most of the time (3), Always (4) was utilized. Scores obtained from the scale can be calculated based on the arithmetic mean or standard scores in a 100-point system. The scale had Cronbach alpha internal consistency coefficients of 0.92 for the total score, 0.86 for the GR, 0.85 for the CI, 0.85 for the KC, 0.74 for the DC, and 0.76 for the GC subscales.

In this study, the reliability coefficients for the CEES were found 0.93 for the total score, 0.79 for the GR, 0.87 for the CI, 0.89 for the KC, 0.72 for the DC, and 0.85 for the GC subscales.

Data Collection

The required analysis studies were performed prior to commencing the research. Opinions of parents and teachers were requested, and data from studies completed by the school guidance and psychological counseling services were investigated. Finally, it was decided to implement a

psychoeducation program about increasing the efficacy perceptions of parents, and we identified the required topics. The study was conducted with the approval decision received from the XXX Social and Human Sciences Scientific Research and Publication Ethics Committee (Protocol No. 2024/03) at the 2024/03 meeting dated 21.03.2024. Following the announcements of the planned study, parents who volunteered were determined. A total of 47 mothers applied for the study. The PIF and the CEES were applied to mothers. The PIF and the CEES were completed in approximately 15-20 minutes.

Among those with inadequate and very inadequate child education levels, the experiment group included 10 mothers, and the control group included 10 mothers. The psychoeducation program was applied in 10 sessions, each lasting 50 minutes for the experiment group in the study. Immediately after the program, the CEES was reapplied to participants of both groups, thus the post-test scores of mothers were obtained.

Analysis of Data

Pre-test scores were determined from the first application of the CEES to parents. Post-test scores were calculated for the experiment and control groups after the sessions ended and the scale was reapplied. The data was analyzed via the SPSS 25.0 program. For analysis, descriptive statistics, the Mann-Whitney U test and the Wilcoxon signed ranks test were used.

Results

Table 4 shows pre-test and post-test mean scores of the experiment and control groups, skewness and kurtosis coefficients, and Shapiro-Wilk test p-values. The Shapiro-Wilk test is employed when the number in the study group is less than 50. To ensure normal distribution, the p-value should be larger than .05 (Rockinson-Szapkiw, 2013). The skewness and kurtosis values being in the ±1 interval is an indicator of normal distribution (George & Mallery, 2019). There were subscales with skewness and kurtosis values varying from -1.71 to 3.35 and the Shapiro-Wilk test p-value was smaller than .05. Non-parametric statistics should be used in situations with less than 30 in the study group (Sedgwick, 2012). Considering the number of participants was fewer than 30, the decision was made to use non-parametric statistical methods in this study.

Table 5 shows Mann Whitney U test results for the scores in the experiment and control groups. As it is observed from the participants in the experiment and control groups, there were no statistically significant differences in the pre-test scores received for the CEES (z= -.425, p > .05) and GR (z=-.722, p >.05), CI (z=-.191, p >.05), KC (z=-.229, p >.05), DC (z=-.661, p>.05), and GC (z=-.500, p>.05) subscales. In this context, before beginning psychoeducation, the experiment and control groups had equivalent scores for the CEES and subscales. When the post-test scores received by experiment and control group participants for the CEES (z= -3.782, p <.05) and GR (z= -2.456, p <.05), CI (z=-3.377, p <.05), and DC (z=-2.690, p < .05) subscales were examined, a statistically significant difference in favor of the experiment group was identified. This means after psychoeducation, the experiment group had significantly higher scores for the CEES and GR, CI, and DC subscales compared to the control group. The differences in post-test scores for the KC (z=-1.932, p>.05) and GC (z=-1.912, p>.05) subscales were not found to be significant.

Table 4. Distribution and normality test results for pre-test and post-test scores of individuals in the experiment (E) and control

(C) groups

Variables	Test	N	Mean	SE	SD	Skewness	Kurtosis	Shapiro-Wilk
Pretest – CEES	E	10	48.0	.95	3.00	28	-1.33	.24
	C	10	48.5	1.01	3.22	82	64	.03*
	E	10	60.0	2.04	6.46	.30	-1.71	.17
Posttest- CEES	C	10	48.3	.81	2.56	82	.17	.43
Pretest - GR	E	10	49.2	1.54	4.88	34	02	.69
	C	10	50.5	2.11	6.68	38	-1.53	.08*
Posttest- GR	E	10	59.8	1.80	5.71	01	.59	.36
	C	10	51.2	2.21	7.01	01	1.23	.58
Pretest - CI	E	10	43.8	1.88	5.97	41	22	.75
	C	10	42.9	2.54	8.04	27	97	.22
Posttest- CI	E	10	57.0	2.13	6.75	.61	82	.45
	C	10	41.6	2.17	6.88	.11	22	.50
Pretest - KC	E	10	54.5	3.00	9.48	82	.63	.47
	C	10	56.2	3.14	9.94	.74	.27	.29
Posttest- KC	E	10	65.5	3.28	10.39	57	.45	.78
	C	10	56.5	3.29	10.42	.46	39	.74
Pretest- DC	E	10	47.5	3.00	9.50	-1.39	3.35	.06*
	C	10	46.5	2.36	7.47	.36	15	.85
Posttest- DC	E	10	60.0	3.57	11.30	.00	-1.34	.39
	C	10	45.5	2.52	7.97	.41	13	.44
Pretest - GC	E	10	42.6	5.37	16.98	.44	65	.70
	C	10	44.6	3.44	10.90	.41	-1.67	.04*
Posttest- GC	E	10	56.6	4.12	13.05	.00	.42	.95
	C	10	44.0	4.12	13.03	41	52	.55

Note. Child Education Efficiency Scale: CEEFC, Bringing Responsibility: BR, Communication-Interaction: CI, Knowing the Child: KC, Developing the Child: DC, Guiding the Child: GC, *p<.05

Table 5. Mann Whitney U test results for scores in the experiment (E) and control (C) groups

Variables	Test	Groups	N	Mean Rank	Sum of Ranks	U	Z	p
CEES	Pretest	Е	10	9.95	99.50	44.500	425	.671
		C	10	11.05	110.50			
	Posttest	E	10	15.50	155.00	.000	-3.782	*000
		C	10	5.50	55.00			
GR	Pretest	E	10	9.55	95.50	40.500	722	.470
		C	10	11.45	114.50			
	Posttest	E	10	13.70	137.00	18.000	-2.456	.014*
		C	10	7.30	73.00			
CI	Pretest	E	10	10.75	107.50	47.500	191	.848
		C	10	10.25	102.50			
	Posttest	E	10	14.95	149.50	5.500	-3.377	.001*
		C	10	6.05	60.50			
KC	Pretest	E	10	10.80	108.00	47.000	229	.819
		C	10	10.20	102.00			
	Posttest	E	10	13.05	130.50	24.500	-1.932	.053
		C	10	7.95	79.50			
DC	Pretest	E	10	11.35	113.50	41.500	661	.509
		C	10	9.65	96.50			
	Posttest	E	10	14.00	140.00	15.000	-2.690	.007*
		C	10	7.00	70.00			
GC	Pretest	E	10	9.85	98.50	43.500	500	.617
		C	10	11.15	111.50			
	Posttest	E	10	13.00	130.00	25.000	-1.912	.056
		C	10	8.00	80.00			

Note. Child Education Efficiency Scale: CEEFC, Bringing Responsibility: BR, Communication-Interaction: CI, Knowing the Child: KC, Developing the Child: DC, Guiding the Child: GC, *p<.05

Table 6. Wilcoxon signed ranks test results for comparison of pre-test and post-test scores in the experiment group

Variables	Ranks	N	Mean Rank	Sum of Ranks	Z	P
CEES	Negative Ranks	0	.00	.00	-2.803	.005*
	Positive Ranks	10	5.50	55.00		
	Ties	0				
GR	Negative Ranks	0	.00	.00	-2.807	.005*
	Positive Ranks	10	5.50	55.00		
	Ties	0				
CI	Negative Ranks	0	.00	.00	-2.807	.005*
	Positive Ranks	10	5.50	55.00		
	Ties	0				
KC	Negative Ranks	1	1.00	1.00	-2.706	.007*
	Positive Ranks	9	6.00	54.00		
	Ties	0				
DC	Negative Ranks	0	.00	.00	-2.552	.011*
	Positive Ranks	8	4.50	36.00		
	Ties	2				
GC	Negative Ranks	1	2.00	2.00	-2.442	.015*
	Positive Ranks	8	5.38	43.00		
	Ties	1				

Note. Child Education Efficiency Scale: CEEFC, Bringing Responsibility: BR, Communication-Interaction CI, Knowing the Child: KC, Developing the Child: DC, Guiding the Child: GC, *p<.05

Table 7. Wilcoxon signed ranks test results for comparison of pre-test and post-test scores in the control group

Variables	Ranks	N	Mean Rank	Sum of Ranks	Z	P
CEES	Negative Ranks	5	4.40	22.00	566	.572
	Positive Ranks	3	4.67	14.00		
	Ties	2				
	Negative Ranks	1	1.00	1.00	-1.069	.285
GR	Positive Ranks	2	2.50	5.00		
	Ties	7				
	Negative Ranks	4	3.75	15.00	-1.000	.317
CI	Positive Ranks	2	3.00	6.00		
	Ties	4				
KC	Negative Ranks	2	2.00	4.00	378	.705
	Positive Ranks	2	3.00	6.00		
	Ties	6				
DC	Negative Ranks	2	1.50	3.00	-1.414	.157
	Positive Ranks	0	.00	.00		
	Ties	8				
GC	Negative Ranks	2	3.00	6.00	378	.705
	Positive Ranks	2	2.00	4.00		
	Ties	6				

Note. Child Education Efficiency Scale: CEEFC, Bringing Responsibility: BR, Communication-Interaction CI, Knowing the Child: KC, Developing the Child: DC, Guiding the Child: GC

Table 6 presents the Wilcoxon signed ranks test results for the comparison of pre-test and post-test measures for the experiment group. As seen in Table 6, the differences between pretest and posttest scores for the CEES (z=-2.803, p <.05) and GR (z=-2.807, p <.05), CI (z=-2.807, p <.05), KC (z=-2.706, p <.05), DC (z=-2.552, p <.05), and GC (z=-2.442, p <.05) subscales in the experiment group were significant. In other words, after psychoeducation, the scores received by the experiment group for the CEES and subscales were higher by a significant level than scores before psychoeducation.

Table 7 shows the Wilcoxon signed ranks test results for comparison of the pre-test and post-test scores in the control group. As seen in Table 7, there was no significant difference between pre-test and post-test scores for CEES (z=-.566, p >.05) and GR (z=-1.069, p >.05), CI (z=-1.000, p >.05), KC (z=-.378, p >.05), DC (z=-1.414, p >.05), and GC (z=-.378, p >.05) subscales in the control group.

Discussion

The purpose of the current study is to examine the effect of a psychoeducation program for mothers on the child education efficacy perceptions of mothers. Based on findings, the experiment group had significantly higher level of scores for the CEES and GR, CI, KC, DC, and GC subscales after receiving the psychoeducation compared to before the training. Additionally, it was identified that the pre-test and post-test scores for the CEES and GR, CI, KC, DC, and GC subscales did not differ by a significant level in the control group. After psychoeducation, the experiment group had significantly higher scores for CEES and GR, CI, and DC subscales compared to the control group. Additionally, no significant difference was identified for the post-test scores of the GC and KC subscales in the experiment and control groups.

In the study, it was emphasized that the scores for the CEES and GR, CI, KC, DC, and GS subscales of the experiment group after psychoeducation were significantly compared to the scores received psychoeducation. Following the psychoeducation, the experiment group was determined to have statistically significant higher CEES and GR, CI, and DC subscale scores than the control group. Studies in the literature are consistent with the findings of the current research. The findings of both psychoeducation studies and other research based on group psychological counseling, trainings and individual counseling for parents appear to be similar to the results of the current research (Akosmanoğlu & Bedel, 2023; Berge et al., 2010; Bloomfield & Kendall, 2007, 2012; Çabuk & Şahin, 2017; Kim & Chung, 2006; Morawska et al., 2014; Neslitürk & Deniz, 2014; Oh & Cho, 2009; Pehlivan, 2008; Puckering et al., 1994; Roghanchi et al., 2018; Sofronoff & Farbotko, 2002). For example, researchers reported a significant effect of psychoeducation for mothers on the interest, discipline and participation subscales comprising development of selfefficacy perceptions in the experiment group (Akosmanoğlu & Bedel, 2023). Another study by Pehlivan (2008) detected a significant increase in mothers being satisfied with the emotional relationships experienced with their children for those in a psychoeducation experiment group. Similarly, researchers in a study determined that a maternal education program positively affected the communication of mothers with their children (Çabuk & Şahin, 2017). A study by Neslitürk and Deniz (2014) found increases at a significant level for communication skills between mothers and children and taking responsibility after a values training program applied to mothers. The results of a psychoeducation study performed with 21 mothers experiencing serious parenting problems found increases in warmth, sensitivity and effective control (Puckering et al., 1994). Another study by Oh and Cho (2009) reported that mothers in a group receiving counseling had more indecision regarding emotional expression, more adverse communication and more adverse parenting behavior than the comparison group. Researchers dealing with group psychological counseling for mothers and daughters concluded that it was efficient in enhancing the relationship between parents and children, as well as the overall functioning of the family. (Roghanchi et al., 2018). Kim and Chung (2006) indicated that a parent education program completed based on solution-focused therapy, Satir's experiential family therapy and cognitive-behavioral therapy reduced parental stress of mothers, significantly increased the feeling of parental efficacy and positive maternal behavior during mother-child interactions and developed the selfconfidence of mothers and maternal attitudes about raising children. In a study by Berge et al. (2010), researchers identified statistically significant improvements in family functioning and undesirable behavior in the child after participants completed a parenting psychoeducation group. Sofronoff and Farbotko (2002) concluded that an intervention program targeting development of parental self-efficacy for management of problematic behavior related to Asperger syndrome was effective. In the study by Bloomfield and Kendall (2012), they found an increase in parenting selfefficacy after participation in a parenting program. Morawska et al. (2014) reported that a short parenting discussion group about regulating the eating times of children increased parenting self-efficacy. A study investigated 53 parenting programs and concluded that the results of data obtained from

parents participating in the programs were promising (Bloomfield & Kendall, 2007).

As seen in current research and in studies consistent with this research, parenting programs are proposed to enhance the short-term psychosocial health of mothers (Barlow et al., 2003). Parenting self-efficacy appears as a key factor encouraging healthy functioning between parents and children (Albanese et al., 2019). Additionally, systematic structured psychoeducation may be assessed as a complementary approach leading to the development of individuals and reducing problems (Srivastava & Panday, 2016). These programs are founded on social learning theory, behavioral and cognitive learning theories and contribute to strengthening the parenting skills of parents (Selinger, 2019; Thompson & Datchi, 2019). Additionally, it is crucial that participants take an active role in the process according to social learning theory (Davis et al., 2017). Parenting interventions based on social learning principles are considered to be critical for the development of children (Mazzucchelli, 2018). The social learning theory and cognitive-behavioral perspectives form the theoretical basis for psychoeducation groups. Behavior and skills can be learned; thus, they may be changed with new behavior and learning is facilitated within a group offering the opportunity to observe and apply new behavior in a safe structured environment (Kuechler & Andrews, 1996). When evaluated within this scope, it is an expected finding that the psychoeducation program for mothers increased the child education efficacy perceptions of mothers.

No significant difference was detected in the post-test scores for the GC and KS subscales in the experiment and control groups in the research. Çekiç (2019) reported that most mothers stated they knew their children in a study performed with Turkish mothers. Research stated that mothers perceive themselves as having a guiding function for their children (San Jose et al., 2022). Mothers may have a tendency to plan and guide their children's future lives in many ways (Wall, 2010). Considering the relevant literature, no significant difference may have been identified between the two groups after psychoeducation as perceptions of mothers about knowing their children well and guiding them are already present.

There are studies that do not overlap with the findings of this research (Sarabi, 2011; Şimşek & Atak, 2021). For example, the study by Şimşek and Atak (2021) found no significant difference in communication functions after psychoeducation for parents with children aged 12-18 years. Simsek and Atak (2021) found the content of their psychoeducation program on developmental features of the adolescent period mainly and completed it with a video conferencing method. In the current study, psychoeducation study was completed in the face-to-face environment and applied with interactive participation of group participants based on social learning theory. The literature emphasizes that participation in interactive sessions is important for participants in psychoeducation groups (Cowls & Hale, 2005). The differences between these two studies may be due to intense interactive participation in the current study. The study by Sarabi (2011) investigated the effect on the self-efficacy of mothers of children with autism in the preschool period and they concluded that the parental education and skills training program was unable to increase self-efficacy. The study included families with children displaying normal development. The difference between these two studies may be due to parents of children with autism diagnosis experiencing more difficulty in child-raising and

communication with their children compared to parents of children with normal development (Meirsschaut et al., 2010).

Within the scope of this research, the following suggestions are provided for both researchers and field practitioners: In this research, a psychoeducation program was implemented to increase the child education efficacy perceptions of mothers. Parents' increased perception of parenting self-efficacy is an essential factor for the well-being of both themselves and their children (Albanese et al., 2019). Thus, researchers stated that the competence of fathers in child education is notable (Greco & Morris, 2002; Wilson & Prior, 2011). Further studies may be performed to increase the child education efficacy perceptions of fathers. This research is limited to the quantitative data collected. Future studies may be completed with mixed patterns. The psycho-educational study in this research was based on social learning theory. Field practitioners can apply psycho-educational studies developed on the basis of social learning theory to increase parents' self-efficacy perceptions in counseling processes. In addition, seminars organized to increase the perception of selfefficacy for parents can be created in accordance with the basis of social learning theory. Moreover, participants in the group study were not employed and comprised mothers who were preschool and middle school graduates. It appears no consensus has been reached among researchers related to the differentiation of efficacy perceptions with the employment and educational status of mothers (Yeşil et al., 2018, Kuzu & Kısa, 2019, Kwok, & Wong, 2000). This may affect the generalizability of the research.

Author Contributions

All authors were equally involved in all processes of the manuscript. All authors have read and approved the final version of the manuscript.

Ethical Declaration

This study was carried out with the approval decision of Kırşehir Ahi Evran University Social and Human Sciences Scientific Research and Publication Ethics Committee (Protocol No. 2024/03) at the 2024/03 meeting dated 21.03.2024.

Conflict of Interest

"The authors declare that there is no conflict of interest with any institution or person within the scope of the study."

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