

The parenting practices in Hong Kong : A community survey on parents of 4-year old children (2014)

Executive Summary

Background

Early prevention of childhood behaviour problems has become a public health issue. As a public health initiative to prevent child behaviour problems and enhance child health, the Family Health Service (FHS) rolled out a parenting programme in all Maternal and Child Health Centres (MCHCs) since September 2002. A community survey to investigate the pattern of parenting practices and attitude, in terms of parental perception of child behaviour problems, parental stress and parent sense of competence was conducted in August 2002 (Department of Health, 2004), prior to the introduction of the parenting programme. The survey revealed that 10.5% of children aged 4 years might have clinically significant behaviour problems. Parents of children having more behaviour problems were more likely to report higher parenting stress, lower parenting efficacy and lower marital satisfaction. Families with parents of lower educational level, lower occupational status and lower family income reported higher problem levels in terms of parenting and family support variables. Ten years have passed after the implementation of the territory-wide parenting programme of FHS. Change in demographic trends and socio-ecological context in society might affect the mode and involvement of parents in child care and be associated with changes in parenting views and practices. It would be interesting to examine the current parenting practices, child behaviour problems and the use of parenting resources locally.

Design and Findings

The participants were Chinese parents with children aged 4 years (+/- 6 months) who had registered with MCHCs and were living in Hong Kong during the study period. Stratified sampling was used. A total of 844 returned questionnaires were used for analysis, representing a response rate of 75.3%. The set of questionnaires included measures on child behaviour problems, parenting and family support variables, and access to parenting education.

The results indicated that there were 9.6% of parents reported their children had clinically significant behaviour problems. Inter-relationships among child behaviour variables, parenting variables and family support variables were found to be similar to the survey results of 2004. A higher behaviour problem score was found with

mothers having shorter length of residence, or primary/below primary education. Fathers in the managerial/administrative occupations tended to have lower number of child behaviour problems. Social support and some demographic variables were found to have association with the perception of child behaviour problem, parenting stress and marital relationship. Parents with higher parenting stress were more likely to lack social support, having lower family income and being mothers of younger age or shorter length of residence. Lacking support in emergency child care and children with more siblings were associated with the problematic interaction between parent and child, which contributes to parenting stress.

Regarding parenting education experience, the present results suggested that fathers sought for parenting knowledge and skills as much as mothers whereas in the similar study in 2004, fathers who never accessed any parenting education resources outnumbered mothers. About 75% of participants reported that they often or sometimes used MCHC's parenting education resources. Mothers who used these resources were more likely to be of higher educational level. When asked about the views on the parenting information provided, about 50% of participants felt child development, children's diet and nutrition, and physical care were useful. About 35% felt discipline and parent-child communication were useful. Analyses were made to examine the child behaviour, parenting and marital relationship profiles of the users and non-users of the MCHC parenting education resources. There were more parents having high parental distress and problematic parent-child interaction among the non-users compared to the users.

Despite the change of family structure with decrease in participants living with extended families, there was a rise in having grandparents and domestic helpers for childcare in the present study as compared with the 2004 survey.

Implications for Service Provision

The present survey indicates that there are 9.6% of children who may have behaviour problems that are clinically significant. The difference with the result in 2004 was not significant. Similar to other studies, child behaviour problem and parenting stress remained to be higher in families with psychosocial risks such as lower income, lack of social support and young parents. Although the percentage of parents having access to parenting resources was higher, how to reach these needy parents remain to be the common issue to be further explored.

With the increasing participation of fathers in parenting, the needs of fathers

would be an important focus in parenting programme planning. Also, with the rising trend of having grandparents as a valuable source of childcare support, the MCHC parenting programme has sought to involve both parents and grandparents as the recipients of updated parenting knowledge and skills. As there seems to be more problematic parent-child interactions in the non-users of parenting resources, there is a need to enhance the accessibility for parents to the educational information. Use of electronic educational information such as e-learning and public talks outside MCHCs will be the trend of parenting education service.

Family Health Service
Department of Health
2018

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