

Relaxation Training to Reduce the Parenting Stress of Mother of Preschool Age Children

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ABSTRACT

Parenting stress was experienced by all mothers, especially mothers who had preschool-age children. Parenting stress experienced by the mother would affect the confidence and perception of the mother towards care so that it affected the child's development and family stability. This research aimed to examine the effectiveness of relaxation training in reducing parenting stress of mothers for preschool-age children. Five mothers of preschool children participated in this research. The measuring instrument used was the parenting stress index, with a one-group pretest-posttest design research design. The results showed that relaxation training was significantly proven to reduce the stress of parenting in preschool children. The participants expressed that they felt more relaxed and calm so that they were able to manage emotions and find alternative solutions when facing problems that caused the emergence of parenting stress. Besides, physical tension felt to be more reduced.

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1. Introduction

Parenting is a role that must be undertaken by parents, especially mothers when having children. It can be an award as well as a challenge. (Berns, 2007) revealed that the task of parenting is a difficult task. Mothers must carry out several activities to care for children such as ensuring the physical, mental wellbeing of children, and facilitating children to be able to interact with the environment outside the home. The complexity of parenting can cause stress on mothers, especially mothers who have preschool children. This is because preschoolers have more demands that mothers must fulfill to develop their abilities (Skreden et al., 2012). Hurlock (2012) explained that preschool-age or three to six years (3-6 years) is the age of exploring. At that age, the child becomes very active because of curiosity about the state of the environment so that it often asks questions about "who", "what" and "why". Besides, preschoolers also show negative attitudes related to cognitive development, so that many mothers interpret the behavior of children at that age as delinquency.

The results of interviews conducted with mothers of five-year-old children also helped strengthen the view that preschoolers are the age that often invites problems. The mother complains of active child behavior making it difficult to control. Besides the behavior of children who often disassemble toys, but they cannot return to its original form also makes mothers feel upset. This is considered by the mother as a problem both in terms of finances and behavior of children who will be angry and cry until their desires are fulfilled. Mother's ignorance to deal with the child's behavior appropriately, tends to be responded to angrily or pinch the child so that they are easy to control. In addition, the various behaviors exhibited by the child also make the mother label the child as "bad boy". The description illustrates the mother's perception of the behavior of the child which is considered negative, making it difficult to direct the child and cause discrepancies in responding to the child's behavior. This condition can also be called parenting stress.

Parenting stress is described as a conflict that occurs between the demands of the role and ability of parents in parenting (Östberg et al., 2007). Parenting stress is a complex set of processes that involve child

behavior, parenting demands, ability to conduct parenting, the quality of parental relationships with children and other family members, and relationships between parents and others outside the home (Deater-Deckard, 2004). According to Abidin (Ahern, 2004) there are three aspects of parenting stress, including parent distress, difficult child, and parent-child dysfunctional. Parent distress is described as feeling depressed due to the demands of the role of parents in caring for children. A difficult child is described as a characteristic of a child's behavior that influences the difficulty or ease of care. Meanwhile, parent-child dysfunctional is described as a parent-child relationship that is not intertwined well because of the lack of fulfillment of parents' expectations for children.

Several studies have revealed that mothers are more prone to parental stress than fathers, due to the high intensity of parental involvement as the primary caregiver (Oprea & Stan, 2012; Ramzan & Minhas, 2014). This condition is more difficult when mothers do not have jobs or housewives because mothers will be more often confronted with various kinds of children's behavior that are considered negative such as fighting or difficult to control. Although the children's behavior is not a big problem, when it has frequent frequencies, it can trigger problems to the mother (Yeo & Teo, 2013; Deater-Deckard, 2004). In addition to the child's behavior as explained earlier, several other factors also trigger parenting stress, including the number of children (Östberg & Hagekull, 2000), child health problems, and family support (Johnston et al., 2003), parental health problems, parental experiences and self-confidence related to the role of parenting (Deater-Deckard, 2004).

Parenting stress will affect the confidence of the mother in performing the role of the parent so that it can affect family stability (Semke et al., 2010). When the parenting stress increases the mother will spend more time, emotions, and energy so that it will reduce involvement in childcare which can later hamper the child's development (Halme et al., 2006). In line with this, high parenting stress is also associated with poor physical health, psychological well-being for mothers and children (Fonseca et al., 2012). Long-term research shows that parenting stress experienced by mothers can increase children's behavioral and emotional problems (Deater-Deckard, 2004). By breaking down the parenting stress, it can increase the role of parents to minimize the emergence of problems (Semke et al., 2010).

Several previous studies have shown that relaxation is proven effective in reducing stress, anxiety, and increasing subjective well-being (Kaspereen, 2012; Varvogli & Darviri, 2011). Relaxation is a technique to reduce psychological and physiological tension (Dunford & Thompson, 2010). When in stress, the body will experience tension caused by the sympathetic nervous system. The sympathetic nervous system functions to enhance stimulus and push ahead body organs work, such as increased heartbeat and blood pressure. Meanwhile, when relaxes, the parasympathetic nervous system works more. The parasympathetic system functions to trigger the reduction of body organs function that has been pushed by the sympathetic nervous system. This condition explains that relaxation can re-stabilize the body response to reduce parenting stress (Sari & Murtini, 2015). Based on the explained background, the research aimed to examine the relaxation training to reduce mothers' parenting stress for preschool age children. The hypothesis proposed in this research is that relaxation training can reduce parenting stress in preschool children.

2. Methods

The research participants consisted of five participants with criteria, mothers who had preschool children, had parenting stress scores that were included in the moderate or high category, and were willing to follow the research process indicated by informed consent. Measuring instruments used in the process of extracting data using Kurniawan's parental stress scale (Kurniawan & Uyun, 2013). The parenting stress scale consists of 36 valid items with a reliability value of 0.82. Categorization norms for parenting stress consists of three categorizations: high (X> 72), moderate (37 <X ≤ 72) and low (X ≤ 37). In addition, in order to obtain qualitative data regarding the problems experienced by the participants a Focus Group Discussion (FGD) was also conducted.

The research design used was one group pretest-posttest design. Variables will be measured using a parenting stress scale at the pre-test and post-test. Measurements were made to determine the effectiveness of relaxation training to reduce the stress of caring for mothers of preschool children.

The relaxation training conducted for three encounters. Participants who were about to receive the relaxation training were given questionnaires as the pre-test to discover the level of parenting stress felt. Then, participants conducted an FGD to understand the causes, impacts, and solutions that had done more in-depth. The relaxation training on the first encounter comprised three sessions. In the first session, participants were told about the definition, benefit, and procedure in the relaxation. In the second session, participants practiced deep breathing relaxation and progressive muscle breathing techniques. In the third session, participants were given assignments to implement relaxation techniques at home when

experiencing tension resulted from the parenting stress. The relaxation technique on the second encounter comprised three sessions. In the first session, participants reflected on the effects and obstacles in implementing relaxation assignments at home. In the second session, participants repeated to practice deep breathing relaxation and progressive muscle breathing techniques. In the third session, participants were given assignments to implement relaxation techniques at home when experiencing tension resulted from the parenting stress. The relaxation training on the third encounter comprised two sessions. The first session conducted reflection on effects and obstacles in implementing relaxation assignments at home. The second session conducted an evaluation to discover participants' participants' development and handed out questionnaires as the post-test.

The data analysis technique used in this research uses Wilcoxon Signed-Ranks which aims to determine differences in the level of parental stress experienced by mothers of preschool children during pre-test and post-test. Besides that, a descriptive analysis also conducted by analyzing the interview results of the FGD and the evaluation.

3. Findings and Discussion

This research involved five mothers of preschool children. Based on the results of the quantitative analysis conducted (table 1), p values of 0.043 were obtained. Because of the value of p <0.05, the hypothesis proposed in this research is acceptable. This shows that the relaxation training program was significantly proven in reducing the parenting stress for mothers of preschool-age children. There was also a decrease in parenting stress scores experienced by participants after being given relaxation training (table 2)

Tabel 1.

Hasil Uji Wilcoxon Signed Rank

	Post Test-Pre Test		
Z	-2.023a		
Asymp.Sig. (2-tailed)	0.043		

Table 2.

Combined score pre-test and post-test

No	Name	Pre-	Category	Post-	Category
		test		test	
1.	LS	42	Moderate	28	Low
2.	ОК	50	Moderate	38	Moderate
3.	NR	61	Moderate	15	Low
4.	LA	58	Moderate	33	Low
5.	ST	56	Moderate	40	Moderate

These results are supported by the descriptive analysis obtained from the interview results of the evaluation. The five participants expressed more relaxed and calm after doing relaxation. The perceived calm makes participants more able to control emotions and behavior and is able to find alternative solutions to deal with the child's behavior compared to being angry or physically punishing the child. Besides, the muscle tension previously felt by one of the participants also diminished after relaxation. This is in line with previous studies conducted by (Conrad & Roth, 2007), (Varvogli & Darviri, 2011), (Kaspereen, 2012) revealed that relaxation can reduce stress, reduce anxiety, improve the quality of life and welfare of individuals.

Relaxation is a self-control technique that is useful for reducing the tension experienced by individuals by re-stabilizing breathing, thoughts, feelings, and body responses (Davis et al., 2008). Then, relaxation can also reduce the pulse and blood pressure so that it can stabilize breathing again and can overcome muscle tension, fatigue, and pain in the body. These conditions can make the body calm and relaxed (Conrad & Roth, 2007; Davis et al., 2008).

Before being given relaxation training, the five participants experienced parenting stress caused by children's daily behavior, such as children who often quarreled with other siblings, angry children's attitudes, children who were difficult to advise, and less independent children. The various kinds of children's behavior are strengthened by the lack of knowledge parents have in dealing with children's

behavior causing more severe pressure so that negative emotions arise and less effective problem-solving. Like communicating in a high pitch when directing a child or using physical punishment. This is consistent with what was stated by (Deater-Deckard, 2004) that one of the causes of parental stress is the difficulty of caring for children. This theory reveals that the difficulties experienced by parents in caring for children every day can bring up the potential stress that can accumulate over time. In addition to the child's behavioral factors, the lack of support provided by the partner in providing assistance or solutions also contributes to the pressure experienced by parents so that it creates parental stress. This finding is following the research of Johnston et al (2003) that stated that the lack of support provided by the family is one of triggering issues in generating the parenting stress.

Furthermore, after being given relaxation training, the five felt calmer and relaxed in dealing with children's behavior. The perceived calm makes participants more able to control emotions and behavior and might find alternative solutions to deal with the child's behavior compared to being angry or physically punishing the child. This is in line with research conducted by (Manzoni et al., 2009) who revealed that relaxation can reduce the tension caused by demands thereby increasing the ability of oneself to manage stressors and find alternative solutions to problems. Similar to that, research conducted by Kaspereen (2012) also revealed that relaxation makes individuals more relaxed in facing daily demands.

Findings in this research strengthen antecedent researches that examined the relaxation training effectiveness to reduce parenting stress. A research by (Suharsisti, 2018) revealed that the provision of psychoeducation and progressive relaxation to parents of autistic children could reduce parents' stress level due to parenting troubles. In accordance with such findings, research by (Andromeda, 2018) revealed that relaxation training was proven to be effective in reducing excessive tension due to stress.

Based on the results of the comparison of pre-test and post-test scores that have been done, two participants did not show a decrease in the category and are still in the moderate care stress category. Nonetheless, the participants showed a decrease in parenting stress scores. Both participants revealed that relaxation makes them calmer and able to control emotions, but relaxation cannot change a child's behavior, so the stressor is still felt.

4. Conclusion

The results of the research concluded that the child's daily behavior is strengthened by the lack of family support to be a factor in the emergence of parental stress experienced by mothers of preschool children. Relaxation training provides positive benefits that make mothers calmer in dealing with problems, to be able to control emotions, and find alternative solutions to solve problems with children.

References

- Ahern, L. S. (2004). *Psychometric properties of the parenting stress index Short form*. North Carolina State University.
- Andromeda. (2018). Stress management training: Stategi pengelolaan stres pengasuhan untuk orangtua yang memiliki anak difabel. *Intuisi*, *10*(3), 277–283.
- Berns, R. M. (2007). *Child, Family, School, Community: Socialization and Support* (7th ed.). Thomson Wodsworth.
- Conrad, A., & Roth, W. T. (2007). Muscle relaxation therapy for anxiety disorders: It works but how? *Journal of Anxiety Disorders*, *21*(3), 243–264. https://doi.org/10.1016/j.janxdis.2006.08.001
- Davis, M., Eshelman, E., & McKay, M. (2008). *The relaxation and stress reduction workbook* (5 ed). New Harbinger Publications, Inc.
- Deater-Deckard, K. (2004). *Parenting Stress*. Yale University Press. https://doi.org/10.12987/yale/9780300103939.001.0001
- Dunford, E., & Thompson, M. (2010). Relaxation and Mindfulness in Pain: A Review. *Reviews in Pain*, 4(1), 18–22. https://doi.org/10.1177/204946371000400105
- Fonseca, A., Nazaré, B., & Canavarro, M. C. (2012). Parental psychological distress and quality of life after a prenatal or postnatal diagnosis of congenital anomaly: A controlled comparison study with parents of healthy infants. *Disability and Health Journal*, 5(2), 67–74. https://doi.org/10.1016/j.dhjo.2011.11.001

- Halme, N., Tarkka, M. T., Nummi, T., & Åstedt-Kurki, P. (2006). The effect of parenting stress on fathers' availability and engagement. *Child Care in Practice*, *12*(1), 13–26. https://doi.org/10.1080/13575270500526220
- Hurlock, E. B. (2012). Psikologi Perkembangan, Suatu Pendekatan Sepanjang Rentang Kehidupan (terjemahan). Erlangga.
- Johnston, C., Hessl, D., Blasey, C., Eliez, S., Erba, H., Dyer-Friedman, J., Glaser, B., & Reiss, A. L. (2003). Factors associated with parenting stress in mothers of children with fragile X syndrome. *Journal of Developmental and Behavioral Pediatrics*, 24(4), 267–275. https://doi.org/10.1097/00004703-200308000-00008
- Kaspereen, D. (2012). Relaxation intervention for stress reduction among teachers and staff. *International Journal of Stress Management*, 19(3), 238–250. https://doi.org/10.1037/a0029195
- Kurniawan, I. N., & Uyun, Q. (2013). PENURUNAN STRES PENGASUHAN ORANG TUA DAN DISFUNGSI INTERAKSI ORANG TUA-ANAK MELALUI PENDIDIKAN PENGASUHAN VERSI PENDEKATAN SPIRITUAL (PP-VPS). Jurnal Intervensi Psikologi (JIP), 5(1), 111–130. https://doi.org/10.20885/intervensipsikologi.vol5.iss1.art7
- Manzoni, G. M., Pagnini, F., Gorini, A., Preziosa, A., Castelnuovo, G., Molinari, E., & Riva, G. (2009). Can relaxation training reduce emotional eating in women with obesity? An exploratory study with 3 months of follow-up. *Journal of the American Dietetic Association*, 109(8), 1427–1432. https://doi.org/10.1016/j.jada.2009.05.004
- Oprea, C., & Stan, A. (2012). Mothers of autistic children. How do they feel? *Procedia Social and Behavioral Sciences*, *46*, 4191–4194. https://doi.org/10.1016/j.sbspro.2012.06.224
- Östberg, M., & Hagekull, B. (2000). A structural modeling approach to the understanding of parenting stress. *Journal of Clinical Child Psychology, 29*(4), 615–625. https://doi.org/10.1207/S15374424JCCP2904
- Östberg, M., Hagekull, B., & Hagelin, E. (2007). Stability and prediction of parenting stress. *Infant and Child Development*, 16(6), 207–223. https://doi.org/10.1002/icd
- Ramzan, N., & Minhas, K. (2014). Anxiety and depression in mothers of disabled and non-disabled children. *ANNALS*, 20(4), 313–320.
- Sari, H. F., & Murtini. (2015). Relaksasi untuk mengurangi stres pada penderita hipertensi esensial. *Humanitas*, 12(1), 12–28. https://doi.org/10.26555/humanitas.v12i1.3823
- Semke, C. A., Garbacz, S. A., Kwon, K., Sheridan, S. M., & Woods, K. E. (2010). Family involvement for children with disruptive behaviors: The role of parenting stress and motivational beliefs. *Journal of School Psychology*, 48(4), 293–312. https://doi.org/10.1016/j.jsp.2010.04.001
- Skreden, M., Skari, H., Malt, U. F., Pripp, A. H., Björk, M. D., Faugli, A., & Emblem, R. (2012). Parenting stress and emotional wellbeing in mothers and fathers of preschool children. *Scandinavian Journal of Public Health*, 40(7), 596–604. https://doi.org/10.1177/1403494812460347
- Suharsisti, I. (2018). Efektivitas intervensi psikoedukasi autisme dan relaksasi progresif pada orangtua dengan anak penyandang autisme. *Nathiqiyyah*, 1(1). https://doi.org/10.1017/CB09781107415324.004
- Varvogli, L., & Darviri, C. (2011). Stress management techniques: evidence-based procedures that reduce stress and promote health. *Health Science Journal*, *5*(2), 74–89.
- Yeo, K. J., & Teo, S. L. (2013). Child behavior and parenting stress between employed mothers and at home mothers of preschool children. *Procedia - Social and Behavioral Sciences*, 90, 895–903. https://doi.org/10.1016/j.sbspro.2013.07.166