ISSN (Online) 2456 -1304

International Journal of Science, Engineering and Management (IJSEM)
Vol 3, Issue 2, February 2018

The Effectiveness of Social Mentoring on Mother's Perceived Stress and Resilience of Adolescent Children

[1] Dr. Sumathi Chandrasekaran, [2] V.Sri Prashanth
Founder Yuvathi, NGO
Founder, Aganya, NGO

***Abstract*— Mentoring the parent not only enhances their knowledge and skills but also provides personal and professional support to facilitate the bonding with their adolescent children. This study evaluates the impact of two month mentoring of the mothers who have adolescent children with low resilience. The aim of the study was to i) find out whether mentoring has an impact on the perceived stress level of the mother's, ii.) To find out whether mentoring the mothers increased the level of resilience among their adolescent children thus creating healthy relationship with them. A half day bonding session was given between the mother, mentor and the child as a prelude before starting mentorship of mothers over the phone for a period of two months. The sample size consists of 10 mothers and 7 trained mentors who were post graduate students. A pre-assessment was carried on the parent perceived stress and resilience of their children before the mentoring process. The tools used were Perceived Stress Scale and Connor Davidson Resilience scale. Post assessment was done two months after the intervention. The results indicated that social mentoring was effective in decreasing the perceived stress level of the mothers whereas no significant difference was found in the resilience of the adolescents.**

***Keywords*: Social Mentoring, Perceived stress, Mothers, Resilience.**

I. INTRODUCTION

Perceived stress can be viewed as an outcome variable measuring the experienced level of stress as a function of objective stressful events, coping processes and personality factors (Cohen Kamarck &, Mermelstein 1983). Stress is experienced by parents, both as a response to the demands of their parenting role and due to their social and environmental circumstances they encounter. Though children are source of love, and joy to the parents' lives, they experience stress to some extent regardless of their educational levels and the income and social support available to them (Deater-Deckard 2004). Apart from the demands of parenthood, (Deater-Deckard 2004), mother's experience "parental stress" that recognizes a greater context for their stressful experiences (Belsky, 1984). It is observed that mothers are significantly more stressed than fathers. (Vig & Jaswal, 2017, Nelson, 2012).

Adolescent and behavior problems:

Adolescence is marked by immense turmoil in emotional and behavioral domains. WHO defines adolescence as the period of life between the ages of 10-to 19 years (M. Rutter et al, 1976). The adolescent find it difficult to struggles to develop individuality while still conforming to societal norms (Steinberg, 1987). Researchers have found an increase in more internalizing difficulties, such as anxiety and depressed affect (Dubois & Tevendale, 1999; Fenzel, 2000; Harter, 2006; Seidman, Lambert, Allen, & Aber, 2003) during early adolescence. Environmental factors, including family, peer group, school, neighborhood, policies, and societal cues, can both support or challenge adolescent health and well-being. A study in Chandigarh by Malhotra.S, et al, (2009) showed the incidence rate of psychiatric disorder to be 0.18 per cent per year among the 10-17 yrs old adolescents. Health behavior and problems among young people (15-24 years) in India is found to be 22.2/1(Sunitha & Gururaj, 2016).

Mother adolescent relationship:

There is scientific evidence proving the significance of a healthy relationship between mother and adolescent (Forehand & Nousiainen, 1993; Elliott, 2009). Researchers (Steinberg, 2001, Steinberg & Silk, 2002) have demonstrated that the single most consistent predictor of adolescent emotional and psychological well-being is the quality of the parent-child relationship. Parenting of adolescents, exerting more control over the adolescent's behavior (Hardaway & Cornelius, 2014) and using harsh or arbitrary discipline, are associated with an increase in problem behaviors in adolescents (Ponnet, Leeuwen, & Wouters, 2014; Ponnet et al., 2013). Likewise the type of relationship the adolescent experience with their parents is thought to predict their attitudes toward themselves and the quality of relationships

All Rights Reserved © 2018 IJSEM

ISSN (Online) 2456 -1304

International Journal of Science, Engineering and Management (IJSEM)
Vol 3, Issue 2, February 2018

they will have with their peers (Gecas, 1971; Wilkinson, 2004). It is observed that adolescents begin building their own self-concept through observing the reactions directed toward them by significant individuals in their lives (Gibson & Jefferson, 2006). During this developmental period, young adolescents typically rely on their parents for emotional support and advice, and likely to see their parents as significant positive influences on their lives (Blyth, Hill, & Thiel, 1982; Maccoby and Martin, 1983). According to world health report (2001), healthy adulthood depends upon successful resolution of these emotional and behavioral problems. One of the mediating factors that determine the psychological wellbeing of the adolescent between the parent and them is resilience, (Waglind, 1993).

Adolescent resilience:

Resilience is the key to well lived life. (Trang, 2011; Rahmani, 2012; Khalid & Malik, 2012; Ismail & Rafique, 2014). Resilience refers to the capacity of individuals to cope with stress and catastrophe (Anna Lakshmi Narayanan, 2008). Resilience evolves as a dynamic process whereby the individual shows adaptive action (Schoon, 2006) to overcome adversities and gains competence to face future challenges (Chung, 2008). According to the American Psychological Association (2007), basic resilience is developed through caring and positive relationships, and resilience can be taught through psychological interventions (Lightsey, 2006). Researchers (Garmezy and Masten, 1994) began to discover that children usually fared poorly as risk factors increased and resilience diminished. It becomes clear that children and adolescents experience risk and feelings of vulnerability differently depending on the developmental stage they have reached. Hence forth, the research focus was to strengthen the bonding between mothers and their adolescents and thus improving the resilience in adolescents.

Social Mentoring:

Mentoring is a process for the informal transmission of knowledge, social and the psychosocial support perceived by the recipient as relevant to work, career, or professional development; mentoring entails informal communication, usually face-to-face and during a sustained period of time, between a person who is perceived to have greater relevant knowledge, wisdom, or experience (the mentor) and a person who is perceived to have less (Bozeman, B.; Feeney, M. K, 2007). Social mentoring, in this study is a form of informal mentoring in which mentoring opportunities arise appropriately starting and ending quickly based on a specific learning need. A key aspect of social mentoring is that mentee are capable of self-initiating informal mentoring with any mentor or group in the program community at any time (Vetri Vellore, 2012). Research studies (Lynch, Tamburrino, & Nagel, 1997; Van Breda (2001), Vallerand Rhodes, Walker & Courneya, 2018) have indicated the efficacy of telephone based interventions on depressed individuals. Not many studies are available in the Indian context of mentoring mothers through phone; hence this study was a need of an hour to find out the effectiveness of mentoring the mothers to enhance their inner resources thereby facilitating their relationship with their adolescent children. This could consequently help to enrich the coping skills and resilience of the adolescent.

II.OBJECTIVES

1. To determine the effect of social mentoring on Perceived stress level of Mothers.
2. To determine the effect of social mentoring on Resilience of Adolescent children.

III. HYPOTHESIS

1. There will be no significant difference between pre and post intervention among mother's perceived stress.
2. There will be no significant difference between pre and post intervention among adolescence resilience.
3. There will be a negative correlation between perceived stress of mothers and resilience of adolescents.

IV.TOOLS USED

Tools that were used to measure the perceived stress of mothers and adolescent resilience are:

•Screening of mentor using Trait Emotional Intelligence Questionnaire (TEIQue Short Form) by K.V. Petrides to assess the mentor's emotion intelligence.
•Assessment of stress in mothers using Perceived stress scale (Cohen, S; Kamarck T; Mermelstein R, 1983).
•Assessment of the resilience in adolescents using Connor-Davidson Resilience Scale (CD-RISC) by Kathryn M. Connor, Davidson. M.D.

V. SAMPLE DESCRIPTION

The total sample size comprised of 10 mothers of adolescent children. The mothers were chosen from a private mental health center who had relationship issues with their

All Rights Reserved © 2018 IJSEM

ISSN (Online) 2456 -1304

International Journal of Science, Engineering and Management (IJSEM)
Vol 3, Issue 2, February 2018

adolescent children. Children with psychiatric problems, children who are living away with parents, single parents were excluded from this sampling. Adolescent from the age group of 13 to 18 years of both genders were included for this study. Purposive sampling was used to select the sample.

VI. PROCEDURE

After the sample was identified informal consent was obtained from the mothers . This study was undertaken in the following ways:

1. Mentor training for post graduates in psychology.
2. Pre-assessment of Mother and Adolescent
3. A bonding session between mentor and mother, followed by mother and child.
4. Mentoring of mothers through phone for 2 months.
5. Post assessment (after 2 months for both Mother's and Adolescents.).

Mentors were chosen from among the post graduate students of a city college who were screened for emotional quotient using trait emotional quotient questionnaire. Seven students who had higher emotional quotient were selected to be as mentors. The chosen mentors were given six half-day training program in 3 consecutive weeks. The training module consisted of:

- Mistaken goal theory model by Rudolf Drecker.
- Basic concepts of cognitive behavioral therapy.
- Effective stress coping strategies.
- Mindfulness method.

The methodology that was utilized for the intervention program was presentation, video shows, group discussions, individual exercises, role plays, and modeling. At the end of each session, assignment based on their learning was given to ensure their internalization of the concept. The bonding session included group and paired activities to create a better understanding between the mentor and mothers. Similarly the mother and adolescent were also guided through a series of activities that was observed by the mentor closely. After the bonding session, Mentors and Mothers (Mentee) had an agreement regarding the timings and number of sessions in phone per week between them. This was to ensure a smooth and uninterrupted flow in their relationship. The pre assessment was also carried out on the same day. Four mentors were assigned with one mother each, while the three mentors were assigned with two mothers each. A professional support team of two psychologists were assigned to mentors for professional support in need of the situation.

VII. STATISTICAL ANALYSIS:

The collected data were analyzed using the paired t-test to find out the significant difference between pre and post intervention among mother's perceived stress and adolescence resilience. Pearson's product-moment Correlation was performed to establish the relationship between perceived stress of mothers and resilience of adolescents. Statistical analysis was done using the Statistical Package for Social Science version 13 (SPSS).

VIII. RESULTS

Table 1

Paired t value for pre and post scores for mother's perceived stress.

	MEAN		SD		Mean difference	Paired t value
Variable	Pre	Post	Pre	Post		
Perceived stress	27.7	17.8	5.078276	5.34997*	9.9	6.4371

*P<.05

From the above table it is observed that there is significant difference between pre & post-mothers perceived stress.

Table 2

Paired t value for pre and post scores for resilience in adolescents.

	MEAN		SD		Mean difference	Paired t value
Variable	Pre	Post	Pre	Post		
Resilience	21.1	23.6	3.81372	2.67499	-2.5	-5.203

From the above table it's observed that there is no significant difference between pre & post of resilience.

Table 3

Correlation coefficient value of the mothers perceived stress and resilience of adolescents.

Variables	Perceived stress
Resilience	-0.1382*

*P<.05

The obtained value for the correlation shows that there is

All Rights Reserved © 2018 IJSEM

significant negative correlation between the perceived stress of mothers and resilience of adolescents at 0.05 levels.

IX. DISCUSSION

Based on the above results, it was found that social mentoring was effective in reducing the perceived stress of mothers in the post intervention stage. The present finding is validated by a study carried out by Robert, Reese, Collie & Daniel (2002) who found out that, telephone counseling for general mental health concerns using an SFT model. In an article by Ricker (2002), it was reported in the Journal of Counseling Psychology, that telephone counseling appeared to be an effective psychological practice. This can be explained in the context, that mothers were mentored by providing consistent emotional support and equipped them to practice healthy coping strategies, thereby enabling a strong relationship with their adolescent children. The present study utilized parenting skills along with mindfulness to help adolescent to be less intimidated and become more emotionally independent. The mentoring effect was also analyzed for the resilience of the adolescent children. It was found that there was no increase in the resilience of adolescent after the intervention. It is important to postulate whether resilience is being viewed as a trait, a process, or an outcome, instead of taking a dualistic approach whether resilience is present or absent. However, in reality, resilience more likely exists on a continuum that may be present to differing degrees across multiple domains of life (Pietrzak & Southwick, 2011). Hence, two month duration is not sufficient enough to perceive the explicit outcome of resilience in adolescents. Another possible explanation for this insignificant difference could be attributed, to other environmental factors, such as marital relationship (Conger & Conger, 2002), low emotional regulation ability (Extremera et al., 2006) that could be detrimental to the adolescents coping skills.

X .CONCLUSION

A significant strength of the present study was the finding that social mentoring helps to alleviate the stress experienced by mothers of adolescent who had low resilience. The result also endorses the significance of mentoring process as a convenient, accessible and valuable source of support for the general population who experience stress. In guiding the parents to achieve their goals through social mentoring, we support not only the current generation of parents but also the next.

REFERENCES

1. Adams, J. F. (2001). Impact of parent training on family functioning. Child & Family Behavior Therapy, 23(1), 29-42.

2. Ahern,A.N, Ark,P, Byers,J (2008) Resilience and coping strategies in Adolescents pediatric Nursing. Page 35.Retrieved from: http://www.viriya.net/jabref/Resilience_and_Coping_Strategies_in_Adolescents.pdf

3. Belsky, J. (1984). The determinants of parenting: A process model. Child Development, 55(1), 83-96.

4. Berger, D. L., Silver, E. J., & Stein, R. E. (2009). Effects of yoga on inner-city children's well-being: A pilot study.

5. Bozeman, B.; Feeney, M. K. (October 2007). Toward a useful theory of mentoring: A conceptual analysis and critique. Administration & Society. 39(6):719739.doi:10.1177/0095399707304119.

6. Cohen S, Kamarck T, Mermelstein R.A. global measure of perceived stress. J Health Soc Behav. 1983;24:385–96.

7. Conger RD, Conger KJ. Resilience in Midwestern families: Selected findings from the first decade of a prospective, longitudinal study. Journal of Marriage and Family. 2002;64:361–373.

8. Deater-Deckard, K. (1998). Parenting stress and child adjustment: Some old hypotheses and new questions. Clinical Psychology: Science and Practice, 5(3), 314-332.

9. Extremera N., Fernández-Berrocal P., Salovey P. (2006). Spanish version of the Mayer-Salovey-Caruso Emotional Intelligence Test,. Psicothema 18, 42–48.

10. Folkman, S., & Lazarus, R.S. (1988). The relationship between coping and emotion: Implications for theory and research. Social Science and Medicine, 26(3), 309 – 317.

All Rights Reserved © 2018 IJSEM

11. Forehand R, Nousiainen S. Maternal and paternal parenting: critical dimension in adolescent functioning. Journal of family psychology. 1993;7:213–221.)

12. Friedman, E., & Billick, S. B. (2014). Unintentional child neglect: Literature review and observational study. Psychiatric Quarterly,86, 253-259. doi:10.1007/s11126-014-9328-0

13. Gardner, F., Burton, J., & Klimes, I. (2006). Randomised controlled trial of a parenting intervention in the voluntary sector for reducing child conduct problems: Outcomes and mechanisms of change. Journal of Child Psychology and Psychiatry, 47(11), 1123-1132.

14. Kirby D. Deater-Deckard (2004),Parental Stress Yale University ISBN Number: 0300207573,9780300207576

15. Lazarus, R.S., & Folkman, S. (1987). Transactional theory and research on emotions and coping. European Journal of Personality, 1, 141 – 169.

16. Lightsey, O. R. (2006). Resilience, meaning, and well-being. The Counselling Psychologist, 34, 96-107.

17. Lynch D.J, Tamburrino MB, Nagel J Fam Pract(1997)Mar .Telephone counseling for patients with minor depression: preliminary findings in a family practice setting.;44(3):293-8.

18. Pietrzak R. H, Southwick S. M. Psychological resilience in Veterans: Application of a novel classification approach and examination of demographic and psychosocial correlates, Journal of Affect Disorders. 2011;133(3):560–568.

19. Robert J. Reese, Collie W. Conoley & Daniel F. Brossart Effectiveness of telephone counseling: A fieldbased investigation. Journal of Counseling Psychology (2002), Vol. 49, No. 2, 233–242.

20. Rutter M, Graham P, Chadwick,Yule. (1976) Adolescent turmoil: fact or fiction? J Child Psycho Psychiatry. 17:35–56.

21. Scott, M. E.(2017)Common causes of stress for MothersRetrieved from : https://www.verywell.com/common-causes-of-stress-for-mothers-3144845

22. Singh Sunitha & Gopalkrishna Gururaj (2014),Health behaviours & problems among young people in India: Cause for concern & call for action , Indian J Med Res 140, pp 185-208

23. Thompson, R. W., Arnkoff, D. B., & Glass, C. R. (2011). Conceptualizing mindfulness and acceptance as components of psychological resilience to trauma. Trauma, Violence and Abuse, 12, 220-235.

24. Van Breda, A. D. (2001). Resilience theory: A literature review (Research Report MPI/R/104/12/1/4). South African Military Psychological Institute.

25. Vetri Vellore.R(2012) What's Hot in Mentoring? Going Social. Retrieved from https://chronus.com/blog/whats-hot-in-mentoring-going-social

26. Vig.D & Jaswal,I.J.S .Impact of Parental Stress on Their Relationship with Teenage Children, Pages 51-57 | Published online: 01 Sep 2017

27. Wagnild. G.M. and Young, H.M. (1993). Development and psychometric evaluation of resiliency scale. Journal of Nursing and Measurement. 1, 165-178.

All Rights Reserved © 2018 IJSEM