Examination of Emotion Socialization in Early Childhood: Indian vs. U.S. White Families

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ABSTRACT

Parent emotion socialization (ES), the process through which caregivers influence the development and expression of emotions in their children, needs to be interpreted within a socio-cultural context. Given that current research has primarily been conducted in Western cultures, it is critical to examine parent ES among families from Eastern cultural backgrounds. The current study aimed to acquire empirical knowledge on ES goals, beliefs, and practices during early childhood (i.e., with toddlers and preschoolers) using parent-report and observational measures among urban Indian parents and White parents in the United States (US). Data was derived from two samples. Study 1 includes 77 parent-toddler dyads in the US (New York; n = 39) and India (Chennai, n = 38); study 2 includes 217 parents of preschoolers residing in India (native Indian parents, n = 98) and the US (White parents, n = 119). As hypothesized, Indian parents of toddlers and preschoolers endorsed more balanced (i.e. with collectivistic and individualistic components) socialization goals, had differing beliefs on the value and function of emotions, and exhibited some ES practices (i.e., minimization reactions and expressive encouragement) that differed in utility and functionality, compared to White families in the US. Results highlight the need for considering the specific settings in which emotions are expressed when examining ES in Indian contexts, and the importance of considering cultural diversity in examining parent ES beliefs and practices and their impact on child outcomes. The current study contributes to the emerging body of literature on ES during early childhood among urban Indian populations. Findings will facilitate more effective early intervention supporting young children's development in an Indian cultural context, setting them up for success in social, emotional, and academic domains.

Keywords: *parent emotion socialization, early childhood, India, social-emotional outcomes*

GENERAL AUDIENCE ABSTRACT

Parent emotion socialization (ES), the process through which caregivers influence the development and expression of emotions in their children, needs to be interpreted within a socio-cultural context. Current research on this topic has been primarily conducted in Western cultures and as such, it is critical to examine parent ES among families from Eastern cultural backgrounds. The current study explores ES-related goals, beliefs, and practices during early childhood among urban Indian parents and White parents in the United States (US). Overall, Indian parents endorsed more balanced socialization goals (goals that aim to inculcate independence and autonomy along with maintaining interpersonal harmony). Indian parents also had differing beliefs on the value and function of emotions and exhibited some parenting practices (i.e., minimizing the child's emotional response and validating the expression of emotions) that differed in how they affected children's emotional and social outcomes, compared to White families in the US. The current study contributes to the emerging body of literature on ES during early childhood among urban Indian populations. Findings will facilitate more effective early intervention supporting young children's development in an Indian cultural context, setting them up for success in social, emotional, and academic domains.

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Emotion-focused parenting, including how parents model emotional displays and regulate their own emotions, respond to their child's emotions, and talk about emotions, contribute to children's emotional competence (Denham et al., 2015; Eisenberg et al., 1998). These different aspects of parenting have been collectively termed parent emotion socialization (ES). Theory and research have demonstrated that parent ES is strongly associated with and predictive of emotion regulation in children (Cole et al., 2009; Denham et al., 2015; Eisenberg et al., 1998). There has been growing recognition that ES needs to be interpreted within a socio-cultural context (Morelen & Thomassin, 2013; Raval & Walker, 2019). However, current research has primarily been conducted in Western cultures, particularly with White families in the United States (US; Friedlmeier et al., 2011). Parenting beliefs, goals, and practices are highly influenced by cultural norms and ideologies and social-emotional processes have different functionalities in different cultural contexts (Matsumoto et al., 2008). As such, research on parent ES practices in Western cultures cannot be generalized to all parents, especially those from Eastern cultures (Cole & Tan, 2007; Friedlmeier et al., 2011). Existing ES research with Indian families has primarily focused on school-aged children and adolescents, ignoring practices during early childhood, and/or have only used parent-report questionnaires, which are subject to biases, rather than direct observation of parenting practices in ecologically valid situations. Given this backdrop, the current study utilized a multi-method assessment (observations, qualitative interviews, questionnaires) to examine ES beliefs, goals, and practices among Indian parents during early childhood (i.e., with toddlers and preschoolers) and the relation between parent ES and children's emotional and behavioral outcomes, relative to relations for White families in the US.

Importance of Parent ES during Early Childhood

Young children's relationships with their parents play a substantial role in their social-emotional development (Cole et al., 2004; Hastings & Kahle, 2019; Nelson et al., 2016). Through parents, children learn how to understand, express, and regulate emotions, all of which are key aspects of emotional competence (Eisenberg et al., 1998; Leerkes et al., 2020). Developing emotion regulation is a key milestone in child development and is associated with many significant developmental outcomes such as self-esteem, peer relations, academic achievement, and career development (Gross & Muñoz, 1995; Westphal & Bonanno, 2004). On the other hand, emotion dysregulation has been identified as a transdiagnostic risk factor (i.e., linked to a range of internalizing and externalizing psychopathologies; Beauchaine & Cicchetti, 2019; Bunford et al., 2015; Eisenberg et al., 2010; Gross & Jazaieri, 2014; Sheppes et al., 2015). A significant body of literature exists on the influence of ES in shaping early emotional and behavioral development (Denham et al., 2015; Eisenberg et al., 1998; Hajal & Paley, 2020; Leerkes et al., 2020). For example, in Western contexts, parents' labeling of emotions and discussion of causes and consequences of those emotions contribute to the development of social-emotional competencies in children; whereas parents' punitive or dismissing reactions to children's emotions have been associated with lower emotion regulation abilities and worse social-emotional outcomes in children (see Eisenberg, 2020; Tan et al., 2020).

Although Eisenberg's original model of ES (Eisenberg et al., 1998) stressed the importance of contextual influences, there has been growing emphasis on ES practices being interpreted within the cultural context (Tao et al., 2010; Trommsdorff et al., 2012). Culture, typically defined as a system of shared customs, beliefs, and behaviors, exerts influence on parent ES practices, on children's emotion regulation abilities, as well as moderates the

association between parenting practices and emotional competence in children (Friedlmeier et al., 2011; Matsumoto et al., 2008; Morelen & Thomassin, 2013; Raval & Walker, 2019). In 2020, Eisenberg updated the original ES model and highlighted issues and future directions for research on ES (Eisenberg, 2020). This article acknowledged the increasingly important role of culture, but also highlighted gaps in the current literature related to understanding ES in different cultural contexts. Specifically, majority of the research on parent ES has been conducted with upper and middle-class families from the US and other Western countries such as Western Europe and Canada (Friedlmeier et al., 2011).

Accordingly, current models of ES have been developed based on a Western cultural perspective, particularly in White families, and are not applicable to individuals from other cultural groups. For example, within Friedlmeier and colleagues' (2011) framework, the goal of parents from the US and other Western cultures is for their children to develop individualistic emotional competence, which would involve open expression and communication of emotions, supporting the goal of self-assertion. On the other hand, parents in Eastern societies might strive to promote relational emotional competence, which involves being able to regulate socially damaging emotions and communicate feelings with a sensitivity to interpersonal relationships (Friedlmeier et al., 2011; Raval & Walker, 2019). Similarly, the function and value of emotions differs across cultures, with Western cultures often perceiving emotions as important and worth discussing and providing opportunities for teaching and problem-solving (Friedlmeier et al., 2011; Raval & Walker, 2019). In contrast, cultures in which emotions are considered insignificant or even harmful, as is often the case in Eastern cultures, might not focus on the discussion of emotions or support more concealed emotional experiences (Raval & Walker, 2019). Since current classifications of adaptive and maladaptive caregiver ES cannot be applied

to families in distinct cultural groups, researchers, clinicians, and policy makers should be wary about generalizing current models to all families or endorsing or pathologizing certain parenting practices (Friedlmeier et al., 2011; Morelen & Thomassin, 2013; Raval & Walker, 2019).

The Current Cultural Context in India

Understanding these cultural differences and their influence on parent ES is especially crucial for Eastern cultures with alarming social-emotional deficits in young children, such as India (Annual Status of Education Report [ASER], 2020). Before discussing the empirical knowledge on parent ES in India, it is necessary to delineate the current cultural context. The Indian society has always been characterized as collectivistic, with family forming the center of the social structure that promotes cooperation and interdependence (Markus & Kitayama, 1991; Verma & Triandis, 2020). Although this still holds true, globalization and recent market reforms in Asian countries like India and China have led to cultural change. Research has shown that countries that have traditionally valued interpersonal relationships continue to value this interdependence, while also aspiring towards material and economic independence (Suizzo, 2007; Tamis-LeMonda et al., 2008). As a result, the culture of middle-class families in India combines values of self-reliance with interpersonal harmony (Kagitcibasi, 2005). As expected, this has implications for caregivers' behaviors related to the socialization of emotions. In such groups, the value and function of emotions may be viewed in the context of maintaining social relationships, while also supporting autonomy (Raval & Walker, 2019).

The increased emphasis placed on academic skills coupled with cultural ideologies on social-emotional functioning has led to SEL being overlooked in the Indian education ecosystem (Friedlmeier et al., 2011; Morelen & Thomassin, 2013). In fact, attending preschool in India has a significant impact on cognitive development, but has no effect on social-emotional

development (Dean & Jayachandra, 2019). Further, a large-scale study examining developmental indicators related to learning in 4- to 8-year-old children across 24 states in India, found that only 50% of children could accurately identify the four primary emotions (happiness, sadness, anger, and fear) in an emotion identification task (ASER, 2020). Similarly, this study found that 25% of children reported maladaptive responses in conflict situations vs. only 2.5% of children mentioned the use of an adaptive response (ASER, 2020). This suggests a difficulty in the ability to identify emotions and react with adaptive conflict resolution strategies.

Despite this glaring need and acknowledgement of the importance of SEL by several international and national organizations (ASER, 2020; National Council of Educational Research, 2005), schools, teachers, and parents in India have largely ignored or sidelined the social-emotional domain (Loomba & Chawla, 2020). As such, several organizations and entities within India, such as Sattva (Dhata & Kumari, 2020) and the Teacher Foundation, news agencies (Jain, 2020; Loomba & Chawla, 2020), parents, and recently teachers, have emphasized an urgent need for SEL for Indian children (Goel & Dublish, 2020; Hajal & Paley, 2020). In response to this need, the current study seeks to increase the field's limited understanding of family level factors that encourage social-emotional development in early childhood among Indian families.

Current Empirical Evidence on the ES Framework in India

With regards to emotion communication, school-aged children and adults in India do not frequently report verbal forms of emotion expression such as explicitly stating that one is angry or sad; instead, they report using contextual methods of communicating emotions such as explaining the emotion-eliciting situation and allowing the other person to infer the felt emotion (Wilson et al., 2012). This differential preference for communicating emotions likely contributes

to parent ES practices, including how parents express their own emotions, model emotion expression for their child, and how they communicate with their child about emotions. However, the literature on ES practices in India is limited and only spans the last 15 years. Specifically, out of the nine studies on this subject, one article (Raval et al., 2016) assessed children's expression of emotions and the cultural receptivity of those emotions, five articles (Freeman et al., 2022; Kathuria et al., 2022; Raval et al., 2013; Raval & Martini, 2011; Trevethan et al., 2021) examined relations between maternal ES goals and practices, with one of these studies (Raval et al., 2013) comparing Indian families with US families, and three articles (Raval et al., 2014, Raval et al., 2018; Vaishali et al., 2018) examined associations between maternal parenting practices and child functioning, and whether this relation was mediated by children's emotion regulation. Based on the findings from these studies, I generated Figure 1, which provides a picture of the current ES model in the Indian context.

Beliefs on the Experience and Expression of Emotions

Across these studies (Raval et al., 2016; Raval & Walker, 2019), Indian mothers have reported differential acceptability of emotions based on what the specific emotion is, the situation in which the emotion is expressed, and with whom the emotion is expressed. Parents of adolescents in India stated that sadness was significantly more acceptable for their children to express than anger, irritation, or frustration (Raval et al., 2016). Additionally, both categories of emotions, sadness and anger, were significantly more tolerable in interpersonal situations, compared to academic situations. Finally, anger was more acceptable in peer relationships compared to during dealings with adults. These findings were also corroborated by youth self-report indicating that adolescents expressed sadness more than anger, expressed emotions significantly more in interpersonal than academic situations, and expressed anger less in front of

their parents compared to their peers (Raval et al., 2016). Adolescents also reported expressing sadness or physical pain less to their fathers compared to their mothers.

Goals for ES

Socialization goals of middle-class urban and suburban Indian families (which accounts for 55% of the population, with this percentage continuously increasing [Chun, 2010]) emphasize adaptive functioning in two domains, interpersonal relationships and academic performance (Raval et al., 2016). The collectivistic context that prioritizes interpersonal harmony translates to the importance placed on interpersonal relationships, while the significance of achieving academic excellence to maintain or increase one's social status pertains to the focus on academic performance (Raval et al., 2016). Accordingly, Indian mothers focus on their child's regulation of felt emotions in these two situations, as it is critical for success in the Indian cultural context. In prior research (Raval et al., 2014), Indian mothers recorded higher levels of relational goals (e.g., respecting elders, obedience towards parents and teachers, accommodating to others) compared to autonomous socialization goals (e.g., developing self-confidence, being independent); however, the magnitude of this difference was very small. Recent literature (Freeman et al., 2022; Kathuria et al., 2022) suggests that majority of urban Indian mothers advocated for more balanced goals (i.e. goals with both collectivistic and individualistic components). The more salient difference was seen in their goals for emotion regulation in specific situations. Negative emotions such as sadness or anger may be considered particularly less acceptable in academic situations, as Indian parents reported beliefs that these emotional experiences may distract the child from focusing on the academic task at hand. On the other hand, expression of sadness and physical pain was well received in interpersonal situations, but anger was not, as parents report beliefs that these emotions might cause children to prioritize

themselves rather than the group or social context (Raval et al., 2014).

Parent ES Practices

Consequently, these beliefs and goals lead parents in India to socialize anger and sadness differently in various situations. Across studies, parents in India reported using four types of responses to children's negative emotions, namely, problem-focused approaches, emotion-focused responses, minimizing responses, and punitive responses (Raval & Martini, 2011). In interpersonal situations, parents were reported to use an explanation-oriented problem-focused response, which involved explaining why a particular situation occurred and encouraging the child to accommodate and accept the situation rather than change the situation (Raval & Martini, 2011). Examples include providing explanations for contextual factors in the situation, reminding the child about family rules, and advising them on the nature of emotions. Parents also reported using emotion-focused responses such as coaxing and distraction in interpersonal situations. On the other hand, in academic contexts, parents reported using solution-oriented problem-solving approaches such as helping them complete the task at hand. Reportedly, in academic contexts and with regards to children's expression of anger, this approach is accompanied by punitive responses such as scolding and not talking to the child and minimizing responses such as downplaying the child's feelings or the situation (Raval et al., 2018; Raval & Martini, 2011). Further, parents were reported to rarely use expressive encouragement, which involves parents actively encouraging their children to express their emotions (Raval et al., 2018). These responses map on closely with commonly used ES responses among parents from Western cultures (Fabes et al., 1990), but do not include certain responses such as distress (i.e., when parents become aroused or distressed by children's expression of emotions).

Adaptive and Maladaptive ES Practices

Preliminary findings based on one study (Raval et al., 2018) categorizing these ES responses as adaptive versus maladaptive in an Indian cultural context showed that emotion-focused responses and explanation-oriented and solution-oriented problem-focused responses loaded onto an adaptive response factor, such that these responses were positively associated with child emotion regulation. In contrast, punitive responses loaded onto a maladaptive response factor and was negatively associated with child emotion regulation. Interestingly and in contrast to the literature on ES practices in Western, largely White populations, expressive encouragement (i.e., encouraging the child to express their felt emotion) fell into a maladaptive response category and minimizing responses loaded onto both adaptive and maladaptive response factors, whereas this response style is typically viewed as maladaptive in Western families (Raval et al., 2018). These observed differences, especially in terms of expressive encouragement, are important to consider given the targeted developmental period of the current study. During the toddler and preschool years, the two primary ES practices include modeling of emotion expression and regulation as well as encouraging/discouraging the expression of emotions, rather than discussing emotions or emotion-eliciting situations with the child.

Limitations in the Current Literature on ES in India

Existing research on cultural influences clearly portray the need for understanding culture-specific ES practices and the functionality and adaptability of these practices for Indian families. This can be done by further developing our empirical understanding of ES in the Indian context and comparing it to the US model. Current literature on ES in India is scarce and has several limitations: a) *Age Group:* a bulk of the literature (seven out of nine studies) have examined ES practices among parents of older children and adolescents (i.e., ages 6-16); b) *Methodology:* these studies have only used self-report data about hypothetical situations to assess

parent ES practices, which is prone to recall error and reporter biases (e.g., social desirability); c) *Focus on Negative Affect:* seven of nine studies have focused on parent ES of children's negative affect, while ignoring responses to positive affect. The importance of ES of positive affect is becoming increasingly apparent (Katz et al., 2014; Vaishali et al., 2018; Yap et al., 2008). This is especially true in a culture such as India that tends to dampen or minimize positive affect (Vaishali et al., 2018). Therefore, an examination of ES practices in response to toddlers' and preschoolers' positive and negative affect in ecologically valid situations is imperative in an effort to promote the social-emotional development of Indian children.

Present Study

Given this backdrop, the current study aimed to acquire empirical knowledge on ES beliefs, goals, and practices among Indian parents of children in early childhood (i.e., toddlers and preschoolers), through structured behavioral coding of direct observation of parent-child interactions, thematic coding of parent interviews, and self-report data from behavioral rating scales. Specifically, this dissertation aimed to address the following questions:

(1) Are there differences in ES beliefs, goals, and practices among parents of toddlers in India compared to White parents in the US (Study 1 and 2)? It was hypothesized that parents in India would have different beliefs, goals, and strategies for ES practices than parents in the US. Specifically, based on the existing literature with older children from India and other Eastern cultures (e.g., Cole & Tan, 2007; Friedlmeier et al., 2011; Raval & Walker, 2019; Trevethan et al., 2021), it was anticipated that Indian parents would endorse more *balanced goals***,** rather than *autonomous goals*, and would have differential acceptability of emotions based on the emotion expressed (e.g., happiness vs. anger) and the context in which the emotion is expressed (e.g., interpersonal vs. academic settings),

compared to parents of toddlers in the US. Relatedly, Indian parents of preschoolers are less likely to view emotions (specifically negative emotions) as good, based on prior research (Raval et al., 2007; Raval & Walker, 2019; Yates et al., 2008).

(2) **Do ES practices among parents in India load onto different adaptive vs. maladaptive responses than White US families in the toddler developmental period (Study 1)?** It was predicted that parenting practices would be differentially related to child outcomes among parents in India relative to White parents in the US sample. Based on the ES framework model created using existing literature with Indian parents of older children (Figure 1; Freeman et al., 2022; Kathuria et al., 2022; Raval et al., 2013; Raval et al., 2014; Raval et al., 2016; Raval et al., 2018; Raval & Martini, 2011; Trevethan et al., 2021; Vaishali et al., 2018), it was hypothesized that expressive encouragement would fall into the maladaptive response category and minimizing responses would fall onto the adaptive response category, as evidenced by associations with child social-emotional outcomes (Negative Affect, Surgency, and Effortful Control).

(3) **Do ES practices among parents in India load onto different adaptive vs. maladaptive responses than White US families in the preschool developmental period (Study 2)?** It was hypothesized that parenting practices would be differentially related to child outcomes among parents in India compared to White families in the US. As mentioned in aim 2, it was hypothesized that expressive encouragement would fall into the maladaptive response category and minimizing responses would fall onto the adaptive response category, as evidenced by associations with child social-emotional outcomes (Total Child Problematic Behaviors).

Methods

Study 1

Participants and Procedures

Participants included 77 mothers (M_{age} = 32.28, *SD* = 5.01) and their toddlers ages 2-3 years (M_{age} = 2.02, *SD* = 0.21; 55.8% female) from the US (New York; *n* = 39) and India (Chennai; *n* = 38). Mothers from the US sample were White and spoke English as the primary home language. In the Indian sample, all mothers were Indian nationals and the families' home language was predominantly Tamil (74%). Other participant demographic information for study 1 is included in Table 1. Mothers and their toddlers completed a two hour at-home visit that included parents interacting with their children during four ecologically valid situations (free play, structured play, clean up, and book reading). This was followed by semi-structured interviews and questionnaires completed by parents about their goals for the completed activities and their views on parenting and on children's social-emotional development in general. During the ecologically valid situations, mothers were asked to interact with their child as they usually would in the language spoken at home for four minutes and these interactions were video recorded. Following each activity, an interview was conducted with open-ended questions such as "If you think about what you were just doing, in 2-3 sentences, could you please tell me about your goals for the book activity?". These questions asked about maternal goals for the specific activities. Open-ended questions were used instead of questionnaires with pre-defined goals to provide parents the opportunity to share responses that were relevant to their specific society and to avoid issues related to social desirability (Leyva et al., 2021).

Measures

The reliability of all self-report questionnaires was assessed using Cronbach's alpha, and

ranges for sufficient reliability was determined utilizing descriptors from Taber (2017). Specifically, alpha values lower than .49 were considered inadequate, between .50-.69 were considered acceptable, .70-.89 were good, and above .90 were excellent.

Parenting Goals and Beliefs. Parenting goals and beliefs were determined using qualitative thematic coding (Williams & Moser, 2019) of the parent interview data. Videotapes of parent interviews were transcribed verbatim by research assistants fluent in the language spoken by the parent. The transcription of these interviews occurred at the utterance level, according to the procedure detailed by Melzi and colleagues (2011). Two research assistants individually reviewed the first 10 transcripts from each sample to obtain categories of parenting goals. Following this, the research assistants discussed their identified categories and came to an agreement on the categories of parenting goals applicable for qualitative coding in this sample (Williams & Moser, 2019). Identified themes and codes are included in Appendix B. Additionally, parents completed an 11-item self-report questionnaire (included in Appendix C) on their socialization goals for their children. Parents rated statements such as "Children should become more assertive" using a Likert scale ranging from 1 (*Strongly Disagree*) to 6 (*Strongly Agree*). Reliability was good in the US ($\alpha = .88$) and the Indian subsample ($\alpha = .77$). Mean scores and frequencies for endorsement of caregiver socialization goals are included in Table 2.

Parenting Practices. Observed parent ES practices during parent-child interactions were evaluated using a coding system developed by Lugo-Candelas and colleagues (2015), which is included in Appendix A. This coding system has been previously used to classify parents' response to children's emotion expression during parent-child interactions with toddlers and preschoolers from a range of racial-ethnic backgrounds (Breaux et al., 2022; Breaux et al., 2016; Harvey et al., 2011; Lugo-Candelas et al., 2015). Behavioral codes were

obtained from parent- child interactions during free play and book reading situations to assess ES practices during an unstructured and a structured activity respectively. This enabled us to examine ES practices in interpersonal (free play) and academic (book reading) settings. The presence and intensity of positive and negative child affect was coded in every 15-minute epoch and for the epochs with identified child affect, parent responses were coded. The codes for parent responses involved ones that have been assessed with existing self-report measures of ES (Fabes et al., 1990; Friedlmeier et al., 2011; Raval & Martini, 2009), such as the Coping with Toddler's Negative Emotions Scale (CTNES) and Coping with Children's Negative Emotions Scale (Fabes et al., 1990). These codes include parental distress, punitive responses, expressive encouragement, emotion-focused reactions, problem-focused reactions, minimizing/discouraging, positive thinking, limit-setting, compromise, gives in, argues, reasoning/clarifying, redirecting, and no- response. Two undergraduate research assistants coded these videos, with discrepancies discussed amongst me and themselves. For parent-child interactions that were in a language other than English (Tamil, Hindi, or other-Indian language), a bilingual research assistant fluent in English and the language spoken in the video completed the coding. Twenty percent of all videos were double coded to assess reliability. The intra-class correlations indicated good to excellent reliability for the US subsample (ICCs=0.69-0.82) and excellent reliability for the Indian subsample (ICCs=0.78-0.85).

Child Emotional and Behavioral Functioning. The 36-item short form of the Early Childhood Behavior Questionnaire (ECBQ; Rothbart, 2006), included in Appendix D, was used to assess child temperament. The ECBQ is an extensively used measure that is available in more than 10 translations where parents indicate the frequency with which their child displays a particular behavior on a 7-point Likert scale. The three higher order factors

measured by the ECBQ include Negative Affect (i.e., discomfort, fear, frustration, sadness, shyness, soothability), Surgency (i.e., impulsivity, activity level, sociability, positive anticipation), and Effortful Control (i.e., inhibitory control, attention shifting, attentional focusing). Mean scores for child temperament are included in Table 3. Reliability was acceptable in the Indian (α = .58, .62, .56, respectively) and US (α = .67, .59, .60, respectively) subsamples.

Study 2

Participants and Procedures

Participants included 217 parents (84% mothers, M_{age} = 32.70, *SD* = 6.29) of preschoolers ages 3-6 years (M_{age} = 4.41 years, *SD* = 1.02, 52% female) from India (*n* = 98) and the US (*n* = 119). Caregivers from the US sample identified as White and spoke English as the primary home language. In the Indian sample, all caregivers were Indian nationals who spoke English fluently. Other participant demographic information for study 2 is included in Table 1. Participants in the Indian subsample were recruited by study staff via emails, social media posts, and distribution of flyers around shopping centers, medical clinics, day cares, and schools in India. Participants in the US subsample were recruited through Qualtrics Panels, which relies on market research panels run by third parties to complete an online questionnaire. Upon expressing interest in participating, participants were provided additional information about the study via email and/or an online information sheet. Once participants consented to participate, they were asked to complete a REDCap (Indian subsample) or Qualtrics (US subsample) survey regarding their beliefs about children's emotions, their ES practices, and their child's emotional and behavioral functioning. Participant eligibility was assessed using a demographic questionnaire on the first page of the online survey and

validation questions (i.e., to ensure they were a parent of a preschool age child) throughout the survey (country of origin, country of residence, number of children, dates of birth of children). Two additional attention checks were included during the survey; if participants provided an incorrect response, the survey automatically terminated, and they were excluded from the study. Upon study completion, participants received $10

compensation in the form of an electronic gift card.

Measures

ES-Related Beliefs. Parents' emotion-related beliefs were assessed using the Parents' Beliefs About Children's Emotions (Halberstadt et al., 2008) rating scale, included in Appendix E. This is a 49-item self-report questionnaire on parents' beliefs about children's emotional development and about parents' role in helping children with their emotions. Parents rate statements such as "It is important for children to be able to show when they are happy" using a Likert scale ranging from 1 (*Strongly Disagree*) to 6 (*Strongly Agree*). This measure has been extensively used with parents of preschoolers from White backgrounds (e.g., Halberstadt et al., 2013) and Eastern cultures (Kiliç & Kumandaş, 2017; Tan et al., 2022). In the present study, we used four subscale scores: Positive Emotions are Good, Negative Emotions are Good, All Emotions are Bad, and Emotions Just Are, where higher scores reflect greater endorsement of that specific emotion-related belief. Reliability was good in the Indian subsample (αs = .82, .77, .89, .84, respectively) and good to excellent in the US subsample (αs = .94, .85, .91, .86, respectively).

ES Practices. Parent ES practices were assessed using the CTNES (Spinrad et al., 2007), included in Appendix F. The CTNES is a questionnaire that includes twelve hypothetical scenarios to evaluate parental ES of children's negative emotions such as anger,

sadness, and physical pain. Parents respond to each scenario by rating the frequency with which they would use one of the responses provided. The wording for question 2 was changed to "your child" rather than "your toddler" to be consistent with the other scenarios and so it is appropriate for use with 3-6-year-old children. This scale has been used as a valid and reliable measure of parental ES in White (Spinrad et al., 2007) and Indian (Raval et al., 2014; Raval & Martini, 2011; Raval & Walker, 2019) samples of preschoolers. In this study, we used six subscale scores: Distress Reactions, Punitive Reactions, Minimization Reactions, Expressive Encouragement, Emotion- Focused Responses, and Problem-Focused Responses. Reliability was good to excellent in the Indian (αs = .84, .85, .84, .94, .87, .89, respectively) and White (αs = .83, .92, .90, .96, .88, .94, respectively) subsamples.

Child Emotional and Behavioral Functioning. The parent-report version of the Strength and Difficulties Questionnaire (SDQ; Goodman et al., 2003), included in Appendix G, was used to assess behavioral and emotional functioning in children. Sample items on the SDQ include "My child is considerate of other people's feelings" and "My child is constantly fidgeting or squirming." Parents rate these items on a three-point scale (0 = *Not True*, 1 = *Somewhat True*, or 2 = C*ertainly True*). The SDQ produces five scales: emotional symptoms (five items), conduct problems (five items), hyperactivity/inattention (five items), peer relationship problems (five items), and prosocial behavior (five items); the first four scales can be added together to generate a total difficulties score based on these 20 items. This scale has been used extensively with diverse international samples, including parents from India (e.g., Lukumar et al., 2008). Scores for total child problematic behaviors is presented in Table 4. Reliability was not satisfactory for three of the five subscales in the Indian subsample (αs = .62, .19, .26, .32, and .72, respectively) but acceptable for total child problematic behaviors; as

such, only this outcome was used in the current study in the Indian subsample (α = .65). Reliability was acceptable to good in the White subsample for the total and five subscales (αs = .70, .72, .75, .76, .63, .74, respectively).

Analytic Plan

Descriptive statistics (e.g., means, standard deviations, and percentages) for parent and child demographic and study variables for the two groups (India and US) in study 1 and 2 were compared using analyses of variance for continuous variables and chi-square tests for categorical variables (see Tables 1-4). Statistical analyses for aim 1 were run with SPSS 29 (IBM Corp, 2019) and for aims 2 and 3 were run using SPSS 29 and R (v4.2.2; R Core Team, 2021).

Aim 1. Using Study 1 data, differences in parent ES goals, beliefs, and practices between US and Indian subsamples were analyzed using both qualitative (beliefs and goals) and quantitative (practices) methods. First, differences in types and proportions of goals, beliefs, and practices endorsed by parents in the Indian versus the US subsample were examined using a series of independent sample *t*-tests (Tables 2-3). Similarly, utilizing Study 2 data, differences in parents' emotion-related beliefs and ES practices between Indian and US subsamples were analyzed using independent sample *t*-tests and presented in Table 4.

Aim 2. Exploratory factor analysis (EFA) using the 'lavaan' package in R was used to determine which parent ES practices group together to create latent parenting variables. However, the Kaiser-Meyer-Olkin (KMO) factor adequacy and Bartlett's Test of Sphericity revealed that our data was not fit for factor analysis. Since an EFA or confirmatory factor analysis (CFA) could not be conducted, simple linear regressions were computed to describe associations between parent ES practices and toddler negative affect, surgency, and effortful

control.

Aim 3. EFA using the 'lavaan' package in R was used to categorize parent ES practices for the entire sample (Indian and White parents). After verifying the factorability of our data using the KMO factor adequacy and Bartlett's Test of Sphericity, the number of likely factors was determined using a scree plot of eigenvalues and parallel analysis, which indicated that a 3- factor solution was the best fit for our data. Following this, a 3-factor solution was fit using maximum likelihood method of estimation and oblique (oblimin) rotation as factors were assumed to be correlated. The model fit was evaluated using comparative fit index (CFI) and standardized root mean square residual (SRMR). Suggested values indicating good fit are .95 or higher for CFI and .08 or lower for SRMR (Hu & Bentler, 1995). The Root Mean Square Error of Approximation (RMSEA) was not primarily used as a fit index due to prior findings that the RMSEA can wrongly indicate a poor fit if there is a small number of degrees of freedom in the model (Kenny et al., 2015). Similar to RMSEA, SRMR can be utilized as a fit index such that larger values indicate a greater departure of the model predictions from the data (e.g., larger residual correlations). SRMR values less than .08 are used as indicators of good fit (Hu & Bentler, 1995). Following the EFA, measurement invariance was conducted to examine whether parent ES variables are functioning the same way across Indian and White US families. To assess measurement invariance, configural, metric (weak), and scalar (strong) invariance models were estimated, and the models were compared using chi-square difference tests (Van De Shoot et al., 2012). When scalar invariance was not established, partial scalar invariance was examined by viewing which fixed (or constrained) parameters in the model should be released and then releasing those parameters to improve fit of the scalar invariance model (Steenkamp & Baumgartner, 1998).

Since measurement invariance was not achieved for our sample, CFA was conducted for the Indian and White US samples independently. CFA of models established in prior research with White (Fabes et al., 2002; Spinrad et al., 2007) and Indian samples with older children (Raval et al., 2018; Raval & Martini, 2011), and based on correlations between parent ES and child emotional and behavioral functioning in the current subsample were computed; fit statistics of the models were compared to determine the model with the best fit for our data from the US White and Indian subsamples. Once the best fitting models were identified, relations between the

identified latent parent ES factors and child total problematic behaviors for the respective samples were examined by computing simple linear regressions.

Results

Preliminary Analyses

Study 1

Due to the significant number of study variables on account of having multiple tasks, correlation tables were not produced. Instead, all significant correlations are reported in text format. First, demographic variables were explored to determine which variables to include as covariates in main analyses. Bivariate correlations between demographic and study variables in the Indian subsample indicated that parent education, child sex, and parent age were significantly correlated with parents' goals and practices (rs = |.35-.47|, ps < .01). Within the US subsample, ongoing child developmental problems, child sex, parent education, and parent age were significantly correlated with parents' goals and practices (rs = |.35 - .79|, ps < .01). Next, correlations between parents' socialization goals and ES practices were examined; results are presented for the Indian subsample first, followed by the US subsample, with free play discussed before the book reading task within each subsample and positive affect before

negative affect within each task.

Indian subsample. Regarding responses to child negative affect during free play, not responding to children's emotions was significantly correlated with collectivistic socialization goals (r = -.40, p < .001), and parent distress was significantly correlated with parents' goal of offering positive reinforcement during interactions with their toddler (r = .43, p < .001). During book reading, parent redirection of child positive affect was significantly correlated with the goal of fostering child creativity (r = -.66, p < .01), and not responding to their child's positive emotions was significantly correlated with the goal of spending time with their child (r = -.52, p < .001). Further, in response to child negative affect during book reading, parent compromise and reasoning was significantly correlated with the goal of their child having fun (r = -.41, p <. 001 and r = -.41, p < .001 respectively), parent redirection was significantly correlated with the goal of their child developing obedience (r = .39, p <.001), not responding was significantly correlated with the goal of preparing their child for future success (r = -.39, p < .001), expressive encouragement was significantly correlated with collectivistic (r = -.56, p < .001) and individualistic (r = -.48, p < .001) socialization goals, and parent minimization reactions was significantly correlated with the goal of preparing their child for academic success (r = -.69, p < .001).

US subsample. During free play, parents' redirection of child positive affect was significantly correlated with parents who always wanted to provide guidance to their child (r = .56, p <.001). In response to negative affect during free play, parent distress reactions was significantly correlated with collectivistic goals (r = .36, p <.001), parent redirection was correlated with collectivistic (r = -.55, p <.001) and individualistic (r = -.50, p <.001) goals and offering positive reinforcement (r = .66, p <.001), not responding was significantly

correlated with preparing their child for academic success (r = -.51, p <.001), promoting child self- discovery (r = .38, p <.001), wanting to spend time with their child (r = -.41, p <.01), and developing obedience (r = .50, p <.001), and problem-focused responses was significantly correlated with the goal of preparing their child for academic success (r = -.69, p <.001). For child positive affect during book reading, parent redirection was significantly correlated with valuing child self-discovery (r = .37, p <.001), and collectivistic (r = .45, p <.001) and individualistic (r = .40, p <.001) socialization goals. Finally, for child negative affect during book reading, parent distress reactions (r = -.40, p <.001) and expressive encouragement (r = -.47, p <.001) were significantly correlated with the goal of developing independence and autonomy, problem-focused responses was significantly correlated with valuing child obedience as a goal (r = .43, p <.01), and minimization responses was significantly correlated with parents wanting to always provide guidance to their child (r = .56, p < .001).

Study 2

Correlations between demographic and study variables (i.e., parent beliefs about emotions, parent ES practices) were examined and included in Tables 5-6. During the preschool developmental period, child sex, parent age, and parent sex for the Indian subsample, and child sex, parent education, and parent sex for the US subsample were significantly correlated with parent ES practices; these demographic variables were included as covariates in main analyses. Within the Indian subsample, the belief that positive emotions are good was significantly positively correlated with punitive reactions, minimization reactions, expressive encouragement, emotion-focused responses, and problem-focused responses. The belief that negative emotions are good was significantly positively correlated with distress reactions, punitive reactions, expressive encouragement, emotion-focused

responses, and problem-focused responses. Parents' belief that all emotions are bad was significantly positively correlated with distress reactions, punitive reactions, and minimization reactions, and significantly negatively correlated with expressive encouragement. Finally, parents' belief that emotions just are was significantly positively correlated with minimization reactions, expressive encouragement, emotion-focused responses, and problem-focused responses. Within the US subsample, the beliefs that positive and negative emotions are good was significantly negatively correlated with punitive and minimization reactions, and significantly positively correlated with expressive encouragement,

emotion-focused responses, and problem-focused responses. Parents' belief that all emotions are bad was significantly negatively correlated with expressive encouragement, emotion-focused responses, and problem-focused responses, and significantly positively correlated with distress, punitive, and minimization reactions. Parents' belief that emotions just are was significantly negatively correlated with expressive encouragement, emotion-focused responses, and problem-focused responses, and positively correlated with punitive and minimization reactions.

Aim 1. Examining Differences in ES Goals, Beliefs, and Practices

Caregivers' Socialization Goals

Based on caregiver-reported rating scales, independent sample *t*-tests (Table 2) demonstrated that on average, Indian parents held significantly lower levels of individualistic socialization goals (developing independence, developing self-confidence, becoming assertive, developing a sense of self-esteem, developing a sense of self) for their toddlers, compared to White parents in the US. Further, Indian parents endorsed the importance of their children learning to obey elderly people significantly higher than US parents. Finally, White parents in the US endorsed significantly higher proportions of goals related to learning to obey parents

and learning to care for the wellbeing of others, compared to Indian parents.

During the semi-structured parent interview, parents from the US and India reported on their goals for engaging in different activities with their toddlers, specifically in relation to child development, as well as on the caregiver's role during those interactions. Several goals and objectives were endorsed by parents, including their child's development of independence and autonomy, learning of new material, self-discovery, fostering creativity, spending time with their child, having fun, and their child's achievement in the future. Of these goals, parents from the US and India significantly differed in terms of frequency and proportion of goals endorsed for a) development of independence and autonomy ($\chi^2 = 7.30$, $p < .01$) where 76% of parents from the US endorsed this goal, and this was significantly more often, compared to 43% of parents in India, b) for their child to have fun ($\chi^2 = 8.81$, $p < .01$), which was endorsed more frequently by parents in India (77%) compared to US parents (41%), and c) future achievement ($\chi^2 = 25.92$, $p < .001$), which was also endorsed more frequently by parents in India (53%) with no parents in the US endorsing future achievement as a goal. With regards to parents' role during interactions with their toddler, parents in India differed significantly from parents in the US on whether they believed the child or the parent should take the lead during parent-child interactions and activities ($\chi^2 = 75.90$, $p < .05$); 27% of parents in India stated that the parent should lead the interaction, compared to 5% of parents in the US.

Cultural Beliefs about Children's Emotions

Scores for parents' beliefs about their children's emotions are presented in Table 4. Independent sample *t*-tests demonstrated that on average, Indian parents endorsed that negative emotions are good significantly less and that all emotions are bad significantly more

than White parents in the US.

Parent ES Practices

Mean scores for parent responses to child positive and negative affect during free play and book situations are included in Table 3. Given that existing data was used for behavioral coding, the parent-child interaction situations were not specifically designed to elicit positive or negative affect in the child; there were very few epochs in the Indian and US subsamples where child negative affect was identified. As a result, there was limited opportunity for coding parent ES of children's negative affect. Table 3 includes only parent responses to child affect identified during the behavioral coding of interactions in this sample.

ES Practices in Interpersonal (Free Play) Settings. During free play, parents in India and the US responded to their toddler's expression of positive affect with the ES practices of redirection, expressive encouragement, or no response, and to their child's expression of negative affect with redirection, distress, problem-focused responses, or no response. Independent sample *t*-tests demonstrated that on average, Indian parents used expressive encouragement in response to their child's positive affect significantly higher than US parents in this setting. Regarding children's negative affect, US parents responded to their toddler with a significantly higher frequency of distress than Indian parents, and Indian parents responded by redirecting their child significantly more than US parents.

ES Practices in Academic (Book Reading) Settings. During book reading, parents in India and the US responded to their toddler's expression of positive affect with redirection, expressive encouragement, or no response, and to their child's expression of negative emotions with redirection, distress, problem-focused responses, compromise, reasoning, expressive encouragement, minimization, emotion-focused responses, or no response.

Independent sample *t*- tests (Table 3) demonstrated that on average, in response to child positive affect, US parents used redirection significantly more than Indian parents, while Indian parents did not respond significantly more frequently than US parents. In response to their child's negative affect, on average, Indian parents did not respond to their child significantly more than parents in the US.

Differences in Parent ES based on Type of Situation. Paired sample *t*-tests indicated that parents in the Indian subsample responded to their child's expression of positive emotions with expressive encouragement significantly more frequently during free play than book reading, $t(33) = 3.78$, $p < .001$. US parents responded to their child's expression of positive emotion with redirection significantly more frequently during book reading than free play, $t(28) = 4.06$, $p < .001$. With regards to responses to negative affect, parents in India did not respond to their child's emotional expression significantly more frequently in the book reading situation than the free play situation $t(33) = 3.27$, $p < .01$.

ES Practices in Hypothetical Situations. Mean scores for parent self-reported ES practices with preschoolers using the CTNES are presented in Table 4. On average, Indian parents reported using significantly higher levels of punitive and minimizing reactions, and significantly lower levels of expressive encouragement and problem-focused reactions in response to their preschooler's negative emotions compared to White caregivers in the US.

Aim 2. Identifying Adaptive vs. Maladaptive Responses During Toddler Developmental Period

For Indian families, parent responses to child positive affect during free play were not significantly associated with any dimension of child temperament. On the other hand, for parent ES of child negative affect during free play, parent distress was significantly negatively

associated with child effortful control (B = -0.29, SE = .11, p < .05), parents' not responding was significantly positively associated with child surgency (B = 0.13, SE = .07, p < .05), and problem- focused responses was significantly positively associated with child surgency (B = 0.16, SE = .08, p < .05). Parent ES of child negative and positive affect during the book reading situation was not significantly associated with any dimension of child temperament.

For White families in the US, parent expressive encouragement in response to child positive affect during free play was significantly positively associated with child surgency (B = 0.20, SE = .06, p < .01) and effortful control (B = 0.16, SE = .05, p < .01). For parent responses to child negative affect during book reading, parents' reasoning with their toddlers was significantly negatively associated with child surgency (B = -0.28, SE = .11, p < .01). Parent responses to child negative affect during free play and child positive affect during book reading was not significantly associated with any dimension of child temperament.

Aim 3. Identifying Adaptive vs. Maladaptive Responses During Preschool Developmental Period

EFA and Measurement Invariance of Entire Sample

For the CTNES subscales, the KMO statistic was .63, above the standard (.50) for conducting factor analysis. Bartlett's Test of Sphericity demonstrated that the correlation matrix was not random, $\chi^2(21) = 718.79$, $p < .001$. These results indicate that the data is appropriate for factor analysis. A three-factor model (Table 7; see Table 8 for factor loadings) was the best fit for our data (N = 217). The following three factors representing dimensions of parent ES practices emerged: factor A: punitive and distress reactions; factor B: minimization reactions, factor C: expressive encouragement, emotion-focused responses, and problem-

focused responses. Fit statistics showed strong support for the model (CFI = 0.99, SRMR = 0.02).

To determine whether the identified latent ES factors function similarly for all caregivers regardless of their cultural background, measurement invariance was conducted (see Table 9). Invariance across Indian and White US parents was not supported; all models did not demonstrate good fit, and the fit significantly differed when increasingly strong equality constraints were imposed. To establish partial invariance, the expressive encouragement and emotion-focused response variables were estimated freely for the two groups, as the Lagrange Multiplier test (LavTestScore function in lavaan) indicated that these parameters had a significant impact on the scalar invariance model fit (Steenkamp & Baumgartner, 1998). The new scalar invariance model (with expressive encouragement and emotion-focused response freely estimated) was a better fit than the metric invariance model ($\chi 2 = 4.22$ (df = 2), $p = .12$), indicating that partial scalar invariance might be achieved. However, since measurement invariance was not achieved, CFA was conducted for the Indian and White US groups independently.

CFA of Parent ES Practices among Indian Parents

For the CTNES subscales, the KMO statistic was .63, above the standard (.50) for conducting factor analysis. Bartlett's Test of Sphericity demonstrated that the correlation matrix was not random, $\chi^2(15) = 281.60$, $p < .001$. These results indicate that the data is appropriate for factor analysis. A three-factor model (Figure 2; Table 10) was the best fit for Indian families ($n = 98$). The following three factors representing dimensions of parent ES practices emerged: factor A: distress reactions, punitive reactions, and minimization reactions, factor B: emotion-focused responses, problem-focused responses, and minimization reactions,

and factor C: expressive encouragement. Since the factor loadings for minimization reactions was significant and

above .40 on factors A and B, and the difference between the loadings on the two factors was less than .20, it was retained on both factors (Costello & Osborne, 2005; Howard, 2015). Fit statistics showed strong support for the model (CFI = 0.96, SRMR = 0.04).

Associations between Parent ES Factors and Child Outcomes among Indian Families

Linear regressions evaluating the relation between latent parent ES factors and child emotional and behavioral outcomes among Indian families revealed that factor A is maladaptive (i.e., significantly associated with more total child emotional and behavior problems; $B = 1.40$, $SE = .59$, $p < .01$), factor B is adaptive (i.e., associated with less total child emotional and behavioral problems; $B = -1.26$, $SE = .61$, $p < .05$), and factor C is neutral (i.e., non-significant relations with child emotional and behavioral problems; $B = 0.37$, $SE = .33$, $p = .26$). These regression models controlled for child and parent sex and parent age.

CFA of Parent ES Practices among White Parents in the US

For the CTNES subscales, the KMO statistic was .68, above the standard (.50) for conducting factor analysis. Bartlett's Test of Sphericity demonstrated that the correlation matrix was not random, $\chi^2(21) = 447.07$, $p < .001$. These results indicate that the data is appropriate for factor analysis. A two-factor model (Figure 3; Table 11), consistent with models established in prior research (Eisenberg, 2020), was the best fit for White families in the US ($n = 119$). The following two factors representing dimensions of parent ES practices emerged: factor A: distress reactions, punitive reactions, and minimization reactions, and factor B: emotion-focused responses, problem-focused responses, and expressive encouragement. Fit statistics showed strong support for the model (CFI = 0.99, SRMR =

0.04).

Associations between Parent ES Factors and Child Outcomes among US White Families

Linear regressions evaluating the relation between latent parent ES factors and child emotional and behavioral outcomes among white families in the US revealed that factor A is maladaptive (i.e., associated with more child emotional and behavior problems; $B = 1.89$, $SE = .60$, $p < .01$) and factor B is adaptive (i.e., associated with less child emotional and behavioral problems; $B = -1.24$, $SE = .68$, $p < .05$). These regression models controlled for child and parent sex, child behavior problems, and parent education.

Discussion

The present study utilized a multi-method assessment (observations, qualitative interviews, questionnaires) to examine ES beliefs, goals, and practices among urban Indian parents of children in early childhood (i.e., toddlers and preschoolers) and the relation between parent ES and children's emotional and behavioral outcomes, relative to relations for White families in the US. As hypothesized, Indian parents endorsed more balanced (i.e., collectivistic and individualistic components) socialization goals and their meta-emotion philosophy, especially about negative emotions, differed from US White parents. Their beliefs about the function and value of emotions, coupled with their focus on maintaining interpersonal harmony and achieving academic success, led them to employ different ES responses based on the type of expressed emotion (i.e., excitement versus anger) and the environment in which emotions are expressed (i.e., interpersonal versus academic). Based on the observed within- and between-culture differences, there might be a need for context specificity when examining ES in Indian families, where understanding the specific settings in which child emotions are expressed may help determine whether a parent ES response is

adaptive or maladaptive. Relatedly, certain ES practices, specifically minimization responses and expressive encouragement, did not fit into a dichotomous conceptualization as found with Western, largely US White samples (including those in this study). Rather, these practices had differing functionality compared to White families. The current findings have important implications for understanding ES in an urban Indian cultural context and for more accurate early intervention with this population. In the following sections, I elaborate upon these findings and their implications.

Differences in ES Goals and Beliefs in US vs. Indian Families

When differentiating ES in Eastern versus Western cultures, the most prominent cultural aspects are the concepts of individualism versus collectivism, meta-emotion philosophy, and power structure within families (Friedlmeier et al., 2011; Matsumoto et al., 2008; Morelen & Thomassin, 2013; Raval & Walker, 2019). Utilizing interview and questionnaire data, the current findings on ES goals and beliefs speak to each of these cultural aspects. Findings in the present study displayed that, overall, Indian parents of toddlers endorsed both individualistic and collectivistic socialization goals, while prioritizing relational goals. Importantly, Indian parents valued autonomous socialization goals (i.e., development of independence and autonomy, self- confidence, a sense of self) considerably less than White parents in the US. They also emphasized certain relational socialization goals more than parents in the US, including learning to respect elderly people. Finally, compared to white US parents, one of Indian parents' primary objectives for interactions with their toddler included preparing their child for academic and economic success in the future. These findings support prior literature and theory exhibiting that collectivistic contexts prioritize group goals, social harmony, and humility. In contrast, individualistic contexts such as those in Western cultures

focus on developing independence, self-esteem, and other characteristics that emphasize personal goals (Morelen & Thomassin, 2013; Raval & Walker, 2019). The current findings align with prior literature concerning the present cultural context in India that combines values of self-reliance with interpersonal harmony. As a result, the social and emotional expectations to function as a successful adult are vastly different, based on the context, thereby affecting parents' socialization goals for their children.

Another way that the cultural context presented itself in the form of ES-related goals concerned the power differential between family members, which affects children's interactions with parents. Collectivistic societies are characterized more by vertical family structures, where parents are usually at the top of the hierarchy and obedience in children along with respect for elders is highly valued (Halberstadt & Lozada, 2011). The finding in the present study, where parents in India expressed that they would like to lead activities with their toddlers a majority of the time, much more than White parents in the US did, validates this cultural manifestation.

Finally, the current findings speak to differences in cultural beliefs and perspectives regarding the function and value of emotions. When compared to White parents in the US, Indian parents of preschoolers held substantially lower levels of the belief that negative emotions are good and higher levels of the belief that all emotions are bad. Certain cultures perceive emotions as important, while some cultures consider emotions as insignificant or harmful, which is often the case in Eastern cultural contexts. These emotion-related beliefs will expectedly have implications on how parents discuss emotions with their child as well as model emotional expression in different settings (Raval & Walker, 2019).

Differences in Parent ES Practices in Indian vs. White US Cultural Contexts

Although factor analyses of observed parent ES practices could not be completed, interesting results emerged for how Indian and White US parents differed in their responses to child positive and negative affect. To the best of our knowledge, our study is the first to report on parent ES of positive affect in Indian families during the toddler developmental period. In interpersonal settings, Indian parents validated their child's positive emotional state (quietly being with the child in a supportive way while he/she is happy) more than US parents. This contrasts with studies conducted with older Indian children, where findings demonstrate that expressive encouragement is used less in the Indian cultural context. These mixed results could be because positive emotions are more acceptable than hostile emotions (e.g., anger, frustration), and all emotions are more acceptable in interpersonal settings (Raval et al., 2016) such as a play environment among Indian families. Notably, responses to child positive affect during book reading, which can be considered as an academic setting, were different. Indian parents did not respond to their child's expression of positive emotion in this task, an environment that may be considered as influential to academics. In response to negative emotions, White US parents exhibited distress responses more often than Indian parents, and Indian parents redirected their child's emotional response more often than US parents. These findings speak to the contextual sensitivity (Wang, 2022) that is required while understanding ES in Indian contexts, given that the acceptability of emotions in Indian societies depends on the setting and relationships involved
(Raval et al., 2016; Raval & Martini, 2009). ES questionnaires and interventions that discuss practices as universal may not land well with this population.

During the preschool years, Indian parents reported using higher levels of punitive and minimizing responses, and lower levels of expressive encouragement, in response to their

child's negative affect. This is consistent with findings from studies involving older Indian children (Raval et al., 2018; Raval & Martini, 2011). It is unclear whether the differences we found in observed versus reported ES practices reflects differences in measurement, differences in the developmental periods, or both.

Associations between ES Practices and Children's Emotional and Behavioral Functioning

During toddlerhood, for Indian families, parent ES of child negative affect was more consequential for child temperament compared with responses to child positive affect. Specifically, parental distress in response to toddlers' negative emotions was found to be maladaptive (related to lower levels of effortful control) for Indian families. On the other hand, problem-focused responses or not responding to toddlers' negative emotions was associated with enhanced social outcomes (related to higher levels of child surgency). For US parents, expressive encouragement of toddlers' positive affect could be adaptive, as it was associated with higher levels of effortful control and surgency. On the other hand, US parents' reasoning with their toddler during expression of negative affect could lead to reduced impulsivity (lower levels of surgency). The impact of other parent ES responses during this developmental period was not recorded, possibly due to the nature of the study task and limited opportunity to observe responses to toddler negative affect.

During the preschool developmental period, self-reported parent ES practices were measured using the early childhood version of the Coping with Children's Negative Emotions Scale (CCNES; Spinrad et al., 2007), which has been utilized by more than 90% of studies conducted with Eastern populations, either in the original or a culturally adapted version (Raval & Walker, 2019). Studies conducted with Western populations (Eisenberg, 2020) have identified two-factor models of ES: maladaptive responses (distress reactions, punitive responses,

minimizing responses) and adaptive responses (emotion-focused responses, problem-focused responses, expressive encouragement). Consistent with prior findings, data from the current US subsample revealed a two-factor model, where distress, punitive, and minimization responses are associated with worse outcomes for preschoolers, while expressive encouragement, emotion- focused, and problem-focused responses were related to better emotional and behavioral outcomes.

In contrast to this, but consistent with studies conducted with Eastern samples (Chan et al., 2009; Trevethan et al., 2021), three factors of ES were revealed for our Indian subsample during the preschool developmental period, including adaptive, maladaptive, and neutral response factors. Specifically, distress and punitive reactions were related to negative child outcomes, emotion-focused responses and problem-focused responses were related to positive child outcomes, minimization responses were related to both positive and negative child outcomes, and expressive encouragement was not related to child outcomes. These findings are consistent with prior studies involving older Indian children (Raval et al., 2018; Raval & Walker, 2019), where minimizing responses and expressive encouragement are not compatible with a dichotomous conceptualization of ES (Raval, 2023).

Minimization Responses

Prior studies with Eastern populations have found that minimization responses, which involves minimizing the situation or the child's feeling, are either unrelated with or linked to positive child outcomes (Han et al., 2015; Raval et al., 2018; Tao et al., 2010). Considering differential acceptability based on the type of emotion and the settings in which emotions are expressed, discouraging the expression of certain emotions (i.e., anger, frustration) in specific situations (i.e., interpersonal settings) may promote emotional competence and better outcomes

for children in the Indian sociocultural context. On the other hand, it is possible that parental minimization early in childhood, when children are first beginning to understand emotions, may be more detrimental than later in development. As such, these findings might suggest that the utility and functionality of this ES practice is context dependent in Indian societies. For example, minimizing emotions can be adaptive by serving as a way to maintain interpersonal harmony and respect for elders and can be maladaptive by causing children to feel misunderstood or leading to difficulties with expressing oneself. The CCNES/CTNES does not allow for recording of parent ES responses based on specific emotions or the environmental context, which may explain why certain practices load onto both adaptive and maladaptive factors in an Indian context.

Expressive Encouragement

Current research on the role of parent expressive encouragement among Eastern families is mixed, with this ES response presenting as adaptive (Chan et al., 2009), maladaptive (Raval et al., 2018), or unrelated (Tao et al., 2010) to child socio-emotional outcomes. In our study, expressive encouragement was unrelated with child emotional and behavioral functioning consistent with past work in East Asian samples, where enhancing or validating the expression of positive or negative emotions are not important correlates of externalizing and internalizing psychopathology (Raval et al., 2017). Parents of adolescents in India consider sadness as significantly more acceptable than anger, irritation, or frustration, and both categories of emotions are more tolerable in interpersonal situations rather than academic contexts and with peers rather than in dealings with adult figures (Kathuria, 2019; Raval et al. 2016, Raval & Walker, 2019). This is a direct result of focusing on the collectivistic goal of group harmony. Hence, parents' encouragement of their child's felt

emotions could be uniquely related to child outcomes, based on the context in which the emotion is expressed; this has not yet been explored in early childhood Indian samples and this level of nuance is not present in the CTNES or CCNES items.

Clinical Implications

To facilitate more accurate early intervention efforts, parenting programs that target the emotional and behavioral development of Indian toddlers and preschoolers should take into consideration the substantial influence of cultural norms and ideologies on parenting practices, as well as the functionality of different emotional and social processes. One of the most important clinical implications from the current findings is that Western classifications of adaptive and maladaptive ES practices cannot be generalized to families from distinct cultural groups, and researchers, clinicians, and policy makers should be wary about applying current models to diverse families. Clinicians should explain emotion-related beliefs and behaviors in the Indian context as assets rather than deficits. For example, while the belief that negative emotions are bad and the ES practices of distress or minimization, may be viewed as problematic among White families, this might not be fully applicable in Indian contexts. It may be advantageous to discuss with parents that these beliefs might be beneficial in some Indian contexts, such as those implicated in establishing and maintaining interpersonal relationships, rather than pathologizing them (Morelen & Thomassin, 2013; Raval & Walker, 2019).

Similar to Wang's (2022) situational level of analysis, contextual sensitivity should be given considerable importance when working with Indian families (Raval et al., 2016; Raval & Martini, 2009; Fan et al., 2023). Interventions for Indian families should revise session content to focus on adaptive and maladaptive aspects of parent ES practices, especially minimization

responses and expressive encouragement, based on the type of emotion as well as the situational setting and context. For instance, this could include discussions around the significance and value of validating emotions and emotional experiences within social contexts, even if those emotions aren't emphasized in academic settings. By doing so, families have the opportunity to learn about the utility of certain practices outside of academic environments. ES-related goals and beliefs may not necessarily be the central focus of the intervention, given findings that they are not meaningfully related with ES practices. Nevertheless, while not a primary target, these goals and beliefs remain pertinent within the broader ES framework since it conveys attitudes toward expression of emotions, indirectly influencing the overall acceptance of emotional experiences.

As such, psychoeducation sessions can include a discussion about culturally relevant goals and beliefs about emotions to encourage an understanding of why practices are considered adaptive versus maladaptive. Further, findings on ES beliefs and practices in Indian families can be used to revise homework activities and handouts from existing parenting interventions to ensure ecological validity. Highlighting ways in which improving socioemotional outcomes for young children can impact their future academic and economic prospects is particularly important, given that this is one of Indian parents' key objectives for their children. Finally, it will be important to support parents with issues specific to the Indian family structure such as ensuring that all caregivers are on the same page about parenting practices, despite power dynamics and differential parenting roles.

Limitations and Future Directions

The findings and implications of this study should be interpreted within the context of several limitations. Firstly, our study used observational data of parent-toddler interactions in

ecologically valid situations that failed to elicit high levels of negative emotionality. Therefore, there was limited opportunity to observe parent responses to child negative affect, which could have prevented an accurate understanding of parent ES of negative affect during toddlerhood. Future investigations should observe parent ES during observational tasks that are specifically designed to elicit negative emotions in children (e.g., Free Play Frustration Task used by Havighurst et al., 2019). Concerning measures used to collect self-report data, although the CCNES/CTNES has been extensively used to measure parent ES with culturally diverse populations, this self-report measure might not exhibit the cultural sensitivity to accurately capture all parent ES practices in an Eastern cultural context. A culturally adapted version of the CCNES might serve to examine parent ES practices among Eastern populations in a more valid and reliable manner (Cole et al., 2006; Raval, 2023; Raval and Martini, 2009; Raval et al., 2014; Raval et al., 2016). This could include more culturally salient vignettes and parent response styles that enable us to better capture expressive encouragement and other culturally distinct practices. That said, these vignettes and response styles might still not be nuanced enough and employing observational methodologies when possible is important. Thirdly, the reliability of the questionnaires used in the study was low, especially for the Indian subsample, which could have been due to cultural differences in interpreting the questions.

Our study included two other methodological limitations: cross-sectional research design and small sample size. The present study and the majority of previous research has only used cross-sectional designs to examine the influence of parent ES on child problematic behaviors in Indian families. Contemporary parenting theories have posited that children are active agents who affect their parents' behavior (Pardini et al., 2008) and as such, there might be child-driven processes where children's internalizing and externalizing problems may

influence parenting and parent responses to their child's emotional expression (Kerr et al., 2010). Our study's small sample size created further limitations for conducting factor analyses and adequately examining these relations. Future research should employ longitudinal methodologies with larger samples that include observations from early childhood to adolescence to investigate more complex models of bi-directional associations and mediation among ES-related goals, beliefs, practices, and child outcomes. This is especially important when considering cultural differences, as variations in children's appraisals of their parents' ES is influential in child outcomes (Freeman et al., 2021; Kaul et al., 2019; Teo et al., 2017).

India is a country with significant diversity and sociodemographic differences among its population. With more than 121 spoken languages in India, English serves as the subsidiary official language (Krishnaswamy, 2006), and as such, all study measures were completed in English. This is representative of the culture in India, where English serves as the corporate languages and the language of communication when discussing important matters. English is also the medium of instruction for a majority of schools in India and most middle-class parents speak English fluently (Krishnaswamy, 2006). Consistent with this, the current study presents findings from educated, middle-class families in the metropolitan city of Chennai who speak English fluently (see Appendix H). Hence, results cannot be generalized to all Indian families, especially those from rural regions, and subsequent studies should examine ES frameworks in distinct Indian communities. The current study is also limited by its disproportionate representation of female caregivers. When working with families from diverse cultural contexts, it is crucial to consider the power differential between family members and how this may influence parenting practices (Friedlmeier et al., 2011; Matsumoto et al., 2008; Morelen & Thomassin, 2013; Raval & Walker, 2019). Collectivistic societies are characterized by

vertical family structures, where adult males are typically at the top of the hierarchy (Halberstadt & Lozada, 2011). As a function of this, mothers and fathers in India might engage in differential emotion expression with their child and exhibit differing parenting behaviors (Jose et al., 2000). Such family structures underscore the need to consider variations between different caregivers (e.g., mothers, fathers, grandparents, siblings) in future research.

Finally, certain demographic variables and differences between and within samples might have impacted our study findings. Specifically, Indian parents of toddlers and preschoolers reported significantly lower levels of behavior problems compared to white caregivers in the US. Future studies should explore whether these differences stem from cultural variations in perceptions of child behavior problems or a tendency to underreport such issues. Further, parent education was significantly higher for White parents in the toddler sample (study 1), but significantly higher for Indian parents in the preschool sample (study 2). Future research should consider adding parent education as a covariate in main analyses and/or controlling for such factors across subsamples, as this demographic characteristic might be a confounding variable and/or limit generalizability of the results.

Conclusion

Despite these limitations, the present findings further emphasize that the contexts in which parent-child interactions and ES practices are embedded should be given considerable importance while understanding and categorizing parent ES practices. The current study promotes our empirical understanding of ES among parents of toddlers and preschoolers in an urban Indian context, utilizing a mixed-methods (qualitative and quantitative) research design. Indian parents value balanced socialization goals, are less likely to endorse that negative emotions are good, and exhibit higher levels of punitive and minimization reactions and lower

levels of expressive encouragement in response to their child's emotional expression. Further, in contrast to current theoretical frameworks and findings with White US populations, expressive encouragement and minimization reactions have different functionality among urban Indian families. Within an Indian sociocultural context, it is important to expand on the types of situations in which ES is typically studied and understood, as parenting practices might be context dependent. The current study contributes empirical information towards a culture-informed theory of ES practices among urban Indian families in early childhood, which contributes towards culturally relevant prevention and early intervention programs that facilitate the socio-emotional development of young children from Indian backgrounds.

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Table 1

Frequencies or Means and Standard Deviations for Caregiver and Child Demographic Variables

	Study 1		
	India *M (SD)* or % (*n*=38)	**United States** *M (SD)* or % (*n*=39)	*F (df)* or χ^2
Child Variables			
Age	2.02 (0.25)	2.03 (0.17)	0.26 (63)
Sex (% Female)	63.2%	48.7%	1.63
Developmental Problems	2.6%	10.3%	0.16
Caregiver Variables			
Age	30.82 (5.46)	34.08 (3.75)	2.74 (63)**
Sex (% Female)	100%	100%	--
Education (% Graduate Degree or Higher)	30.6%	65.5%	7.90**
Percentage of Caregiving (50% or Above)	88.6%	89.7%	0.02
Family or Household Variables			
Number of Adults	3.64 (1.38)	1.97 (0.33)	6.40 (63)***
Number of Children	1.42 (0.83)	1.90 (1.21)	1.81 (60)*
	Study 2		
	India *M (SD)* or % (*n*=98)	**United States** *M (SD)* or % (*n*=119)	*F (df)* or χ^2
Child Variables			
Age	4.46 (0.97)	4.38 (1.06)	1.96 (215)
Sex (% Female)	55.1%	48.7%	18.96***
Behavioral Health Problems	2.0%	26.9%	25.12***
Caregiver Variables			
Age	31.91 (4.34)	33.35 (7.48)	18.07 (215)***
Sex (% Female)	79.6%	88.2%	3.04
Education (% Graduate Degree or Higher)	46.9%	13.4%	55.38***
Percentage of Caregiving (50% or Above)	94.9%	98.3%	2.61
Family or Household Variables			
Number of Adults	2.72 (1.41)	2.16 (1.05)	24.21 (215)***
Number of Children	1.73 (0.89)	4.38 (1.06)	8.88 (215)**

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Table 2

Means and Standard Deviations for Caregiver Socialization Goals in Study 1

Study 1 Variables	**India** *M (SD)* (n=38)	**United States** *M (SD)* (n=39)	*t (df) or* χ^2
Caregiver Socialization Goals (Rating Scale)			
Developing Independence	4.47 (1.48)	5.34 (0.78)	3.19 (74)**
Developing Self-Confidence	4.89 (1.31)	5.74 (0.45)	3.75 (74)***
Learn to Obey Parents	4.68 (1.21)	5.16 (0.68)	2.10 (74)*
Become Assertive	4.14 (1.34)	4.74 (0.98)	2.23 (73)**
Learn to Obey Elderly People	5.05 (1.09)	4.24 (1.03)	3.36 (74)***
Learn to Care for the Wellbeing of Others	4.59 (1.36)	5.24 (1.05)	2.29 (73)*
Develop Sense of Self-Esteem	3.92 (1.50)	5.53 (0.69)	6.01 (74)***
Learn to Help Others	5.03 (1.13)	5.39 (0.92)	1.56 (74)
Learn to Cheer Up Others	4.76 (1.17)	4.42 (1.24)	1.23 (74)
Develop Competitiveness	3.62 (1.61)	3.39 (1.31)	0.67 (73)
Develop Sense of Self	4.37 (1.48)	5.18 (0.90)	2.91 (74)**
Caregiver Socialization Goals (Interview)			
Parents' Role			
Provide Guidance to Child Always	21.1%	10.3%	*2.83*
Spend Time with Child	65.8%	43.6%	*9.90***
Parent Leads Interaction	21.2%	5.1%	*5.90**
Ensuring Child's Safety	39.5%	23.1%	*4.75**
Provide Positive Reinforcement	10.5%	2.6%	*2.71*
Goals for Child			
Developing Independence and Autonomy	34.2%	71.8%	7.30**
Educational	73.7%	87.2%	0.05
Developing Sense of Self	26.3%	53.8%	3.66
Developing Creativity	60.5%	66.7%	0.35
Have Fun	60.5%	38.5%	8.81**
Increase Achievement Abilities	42.1%	5.1%	25.92***
Learn Obedience	10.5%	2.6%	2.71

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Table 3

Means and Standard Deviations for Parent ES Practices and Child Temperament in Study 1

Study 1 Variables	**India** *M (SD)* (n=38)	**United States** *M (SD)* (n=39)	*t (df)*
Parent ES Practices (Free Play Situation)			
Responses to Child Positive Emotion			
Redirection	1.44 (1.28)	1.65 (1.03)	0.72 (67)
Expressive Encouragement	5.00 (0.00)	3.14 (1.68)	6.63 (67)***
Does Not Respond	2.22 (1.89)	2.41 (1.52)	0.48 (67)
Responses to Child Negative Emotion			
Redirection	2.67 (2.00)	1.53 (1.50)	2.66 (67)**
Problem-Focused Response	1.44 (1.28)	1.20 (0.77)	0.97 (67)
Distress	1.00 (0.00)	1.69 (1.64)	2.52 (67)**
Does Not Respond	1.67 (1.51)	1.82 (1.84)	0.34 (67)
Parent ES Practices (Book Situation)			
Responses to Positive Emotion			
Redirection	1.59 (1.44)	3.13 (1.67)	4.03 (64)***
Expressive Encouragement	3.59 (1.94)	3.44 (1.45)	0.36 (64)
Does Not Respond	2.76 (2.02)	1.96 (1.63)	1.78 (64)*
Responses to Child Negative Emotion			
Redirection	2.65 (2.00)	2.41 (1.96)	*0.49 (64)*
Problem-Focused Response	1.94 (1.72)	1.53 (1.48)	*1.03 (64)*
Distress	1.12 (0.69)	1.46 (1.27)	1.39 (64)
Does Not Respond	2.76 (2.02)	1.00 (0.00)	4.95 (64)***
Compromise	1.12 (0.69)	1.38 (1.07)	1.17 (64)
Reasoning	1.12 (0.69)	1.34 (0.94)	1.12 (64)
Expressive Encouragement	1.12 (0.69)	1.43 (0.97)	1.51 (64)
Minimization	1.11 (0.68)	1.22 (0.87)	0.53 (64)
Emotion-Focused Response	1.12 (0.69)	1.00 (0.00)	0.97 (64)
Child Temperament			
Negative Affect	4.29 (0.73)	3.88 (0.49)	2.85 (75)**
Surgency	4.68 (0.60)	4.41 (0.59)	1.95 (75)*
Effortful Control	5.06 (0.58)	4.85 (0.55)	1.61 (75)

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Table 4

Means and Standard Deviations for Study Variables in Study 2

Study 2 Variables	**India** *M (SD)* (*n*=98)	**United States** *M (SD)* (*n*=119)	*t (df)*
Caregiver Beliefs about Emotions			
Positive Emotions are Good	5.42 (0.69)	5.60 (0.72)	1.79 (215)
Negative Emotions are Good	4.23 (0.85)	4.74 (0.73)	4.76 (215)***
All Emotions are Bad	4.03 (1.05)	3.11 (0.97)	6.73 (215)***
Emotions Just Are	5.28 (0.81)	5.33 (0.74)	0.43 (215)
Parent ES Practices			
Distress Reactions	3.25 (1.11)	3.17 (1.12)	0.53 (215)
Punitive Responses	3.61 (1.21)	2.87 (1.44)	4.03 (215)***
Minimizing Responses	4.54 (1.20)	3.32 (1.36)	6.92 (215)***
Expressive Encouragement	3.78 (1.73)	5.60 (1.36)	8.68 (215)***
Emotion-Focused Responses	5.68 (1.06)	5.63 (1.04)	0.35 (215)
Problem-Focused Responses	5.74 (1.11)	6.10 (1.10)	2.37 (215)*
Child Socioemotional Functioning			
Total Problematic Behaviors	14.68 (5.63)	14.07 (6.97)	0.71 (215)

Note. Higher scores on variables for caregiver beliefs about emotions indicate higher levels of endorsement of that belief (Range: 1-6); higher scores on parent ES variables indicate higher frequency of practice used in response to child negative affect (Range: 1-7); higher scores on child socioemotional functioning variables indicate higher levels of total problematic behavior (Range 0-40); *p <.05, ***p < .001.

Table 5

Correlations between Demographic and Study Variables for Indian Subsample (n=98) in Study 2

	Pos Emo - Good	Neg Emo - Good	All Emo - Bad	Emo Just Are	Distress	Punitive	Minimizing	Expressive Encouragement	Emotion Focused	Problem Focused	Total Problems
Emotion-Related Beliefs											
Pos Emo - Good	--										
Neg Emo - Good	.52**	--									
All Emo - Bad	.36**	.26*	--								
Emo Just Are	.64**	.63**	.07	--							
Parent ES Practices											
Distress	.11	.25*	.40**	.09	--						
Punitive	.27**	.29**	.63**	.15	.54**	--					
Minimizing	.35**	.17	.55**	.28**	.27**	.62***	--				
Expressive Encouragement	.15	.36**	-.24*	.29**	-.03	-.05	.02	--			
Emotion-Focused	.46**	.30**	.09	.41**	.10	.13	.42***	.24*	--		
Problem-Focused	.47**	.26**	-.06	.47**	-.08	.01	.35**	.32**	.84**	--	
Child Socioemotional Functioning											
Total Problems	-.02	.15	.19	-.05	.39**	.22*	-.02	.11	-.22*	-.29**	--
Demographic Variables											
Child Age	-.20*	-.11	.04	-.11	-.16	-.11	.01	-.15	-.11	-.12	-.14
Child Sex	-.04	.06	.02	.02	.27*	.28*	-.02	-.26*	-.24	-.28*	.18
Parent Age	-.12	-.24*	-.32**	-.07	-.17	-.23*	-.19	.08	-.15	-.02	-.09
Parent Sex	.18	.37**	-.05	.37**	-.05	.00	.02	.25*	.10	.04	-.01
Parent Education	-.06	0.19	-.24*	.10	-.06	-.16	-.16	-.07	-.09	.10	-.12
Child Behavior Problems	.08	.09	.13	.18	.15	.16	.07	-.10	-.07	-.04	-.15

Note. Pos = Positive, Neg = Negative, Emo = Emotions; Higher scores on emotion-related beliefs and parent ES variables indicate higher endorsement of belief (Range: 1-6) or frequency of practice in response to child negative affect (Range: 1-7); higher scores on child socioemotional functioning variables indicate higher levels of total problematic behavior (Range 0-40); Child and Parent Sex is coded: 1=female, 0=male; Parent Education is coded: 1=Less than 10^{th} Grade, 2=Completed 10^{th} Grade, 3=Partial College or Vocational Training, 4=College or University Graduate, 5=Graduate Degree or Professional Training; Child Behavior Problems is coded: 1=Yes, 0=No; *p <.05, **p <.01, ***p < .001.

Table 6

Correlations between Demographic and Study Variables for White US Subsample (n=119) in Study 2

	Pos Emo - Good	Neg Emo - Good	All Emo - Bad	Emo Just Are	Distress	Punitive	Minimizing	Expressive Encouragement	Emotion Focused	Problem Focused	Total Problems
Emotion-Related Beliefs											
Pos Emo - Good	--										
Neg Emo - Good	.50**	--									
All Emo - Bad	-.07	-.23*	--								
Emo Just Are	.76**	.62**	-.19*	--							
Parent ES Practices											
Distress	-.17	-.13	.21*	-.13	--						
Punitive	-.40**	-.28**	.55**	-.43**	.35**	--					
Minimizing	-.25**	-.24**	.56**	-.27**	.30**	.82**	--				
Expressive Encouragement	.39**	.56**	-.35**	.56**	-.13	-.33**	-.25	--			
Emotion-Focused	.56**	.42**	-.19*	.57**	-.09	-.33**	-.18	.62**	--		
Problem-Focused	.67**	.49**	-.20*	.63**	-.27*	-.45**	-.29**	.64**	.84**	--	
Child Socioemotional Functioning											
Total Problems	-.29**	-.07	.19*	-.18*	.26**	.28**	.23*	-.10	-.16	-.26**	--
Demographic Variables											
Child Age	-.02	-.05	.06	-.05	.10	.13	.13	-.14	-.08	-.12	.06
Child Sex	.08	.10	-.18*	.12	-.04	-.21*	-.18*	.17	.08	.05	-.19*
Parent Age	-.17	.06	-.05	-.10	-.01	.03	-.01	-.06	-.07	-.03	-.14
Parent Sex	.31**	.14	-.21*	.22*	-.02	-.26**	-.20*	.23*	.37**	.39**	-.06
Parent Education	-.23*	-.07	.11	-.35**	-.06	.24**	.12	-.16	-.19*	-.20*	-.08
Child Behavior Problems	-.02	-.01	.13	-.08	.18	.14	.14	-.08	-.01	-.07	-.19*

Note. Pos = Positive, Neg = Negative, Emo = Emotions; Higher scores on emotion-related beliefs and parent ES variables indicate higher endorsement of belief (Range: 1-6) or frequency of practice in response to child negative affect (Range: 1-7); higher scores on child socioemotional functioning variables indicate higher levels of total problematic behavior (Range 0-40); Child and Parent Sex is coded: 1=female, 0=male; Parent Education is coded: 1=Less than 10th Grade, 2=Completed 10th Grade, 3=Partial College or Vocational Training, 4=College or University Graduate, 5=Graduate Degree or Professional Training; Child Behavior Problems is coded: 1=Yes, 0=No; *p <.05, **p <.01, ***p < .001.

Table 7

Exploratory Factor Analysis of ES Practices Among Parents in India and the US

Number of Factors	Model Fit							
	χ2 (df)	**p**	**CFI**	**TLI**	**SRMR**	**RMSEA**	**AIC**	**BIC**
1	390.40 (14)	<.001	0.47	0.21	0.24	0.35	4731.73	4779.05
2	67.75 (8)	<.001	0.92	0.78	0.05	0.19	4421.08	4488.68
3	**10.91 (3)**	**.01**	**0.99**	**0.92**	**0.02**	**0.11**	**4374.24**	**4458.74**
4	Model Not Identified							

Note. χ^2= Chi-Square Statistic, df = degrees of freedom; TLI = Tucker Lewis Index; CFI = Comparative Fit Index; AIC = Akaike Information Criterion; BIC = Bayesian Information Criterion; SRMR = Standardized Root Mean Square Residual; RMSEA = Root Mean Square Error of Approximation

Table 8

Factor Loadings from Exploratory Factor Analysis with Oblique Rotation

CTNES Parent ES Subscales	Factor		
	A	**B**	**C**
Distress Responses	**0.67**	-0.08	-0.09
Punitive Reactions	**0.68**	0.40	-0.30
Minimization Reactions	-0.01	**2.08**	0.01
Emotion-Focused Responses	0.18	0.03	**0.93**
Problem-Focused Responses	-0.12	0.02	**1.07**
Expressive Encouragement	-0.24	-0.23	**0.83**

Note. Factor loadings > .40 are in bold font.

Table 9

Measurement Invariance Models Comparing Indian Families in India and White Families in the US

Model	Model Fit				Difference Tests		
	χ2 (df)	**p**	**CFI**	**RMSEA [90% CI]**	**Δχ2**	**Δdf**	**p**
Configural Invariance	83.89 (24)	<.001	0.92	0.15 [0.117, 0.188]			
Metric Invariance	97.47 (28)	<.001	0.90	0.15 [0.119, 0.184]	13.58	4	<.01
Scalar Invariance	173.92 (32)	<.001	0.81	0.20 [0.173, 0.232]	76.45	4	<.001
Partial Scalar Invariance	101.68 (30)	<.001	0.90	0.15 [0.117, 0.181]	4.22	2	.12

Note. Partial Scalar Invariance model includes the scalar invariance model with expressive encouragement and emotion-focused response freed; χ2 = Chi-Square Statistic; df = degrees of freedom; CFI = Comparative Fit Index; RMSEA = Root Mean Square Error of Approximation; Δχ2 = Chi-square difference statistic; Δdf = degrees of freedom for chi-square difference test; *p <.05, **p <.01, ***p < .001.

Table 10

Confirmatory Factor Analysis of ES Practices Among Parents in India

Number of Factors	Factor Structure	Model Fit							
		χ2 (df)	**p**	**CFI**	**TLI**	**SRMR**	**RMSEA**	**AIC**	**BIC**
1	A: Distress + Punitive + Minimizing + Expressive Encouragement + Problem-Focused + Emotion-Focused	102.60 (9)	<.001	0.61	0.34	0.19	0.33	1770.60	1801.62
2	A: Distress + Punitive + Minimizing B: Emotion-Focused + Problem-Focused + Expressive Encouragement	34.98 (8)	<.001	0.87	0.79	0.15	0.19	1704.97	1738.58
3a	**A: Distress + Punitive + Minimizing** **B: Emotion-Focused + Problem-Focused + Minimizing** **C: Expressive Encouragement**	**15.34 (6)**	**.02**	**0.96**	**0.90**	**0.04**	**0.13**	**1689.34**	**1728.11**
3b	A: Distress + Punitive + Minimizing B: Emotion-Focused + Problem-Focused C: Expressive Encouragement	34.90 (7)	<.001	0.88	0.75	0.15	0.20	1706.90	1743.09
4a	A: Distress + Punitive B: Emotion-Focused + Problem-Focused C: Minimizing D: Expressive Encouragement	14.02 (5)	.01	0.96	0.87	0.04	0.14	1690.01	1731.31
4b	A: Distress B: Punitive C: Minimizing D: Emotion-Focused + Problem-Focused + Expressive Encouragement	15.26 (6)	.02	0.96	0.90	0.05	0.13	1689.26	1728.03

Note. χ^2= Chi-Square Statistic, df = degrees of freedom; TLI = Tucker Lewis Index; CFI = Comparative Fit Index; AIC = Akaike Information Criterion; BIC = Bayesian Information Criterion; SRMR = Standardized Root Mean Square Residual; RMSEA = Root Mean Square Error of Approximation

Table 11

Confirmatory Factor Analysis of ES Practices Among White Parents in the US

Number of Factors	Factor Structure	Model Fit							
		χ2 (df)	p	CFI	TLI	SRMR	RMSEA	AIC	BIC
1	A: Distress + Punitive + Minimizing + Expressive Encouragement + Problem-Focused + Emotion-Focused	197.21 (9)	<.001	0.51	0.19	0.21	0.42	2130.51	2163.86
2	**A: Distress + Punitive + Minimizing B: Emotion-Focused + Problem-Focused + Expressive Encouragement**	**12.26 (8)**	**.14**	**0.99**	**0.98**	**0.04**	**0.06**	**1947.56**	**1983.69**
3a	A: Distress + Punitive + Minimizing B: Emotion-Focused + Problem-Focused C: Expressive Encouragement	12.18 (7)	0.10	0.99	0.97	0.04	0.07	1949.47	1988.38
3b	A: Punitive + Minimizing B: Emotion-Focused + Problem-Focused + Expressive Encouragement C: Distress	11.57 (7)	.12	0.99	0.98	0.04	0.07	1948.87	1987.78
4	A: Punitive + Minimizing B: Emotion-Focused + Problem-Focused C: Distress D: Expressive Encouragement	11.41 (5)	.04	0.98	0.95	0.04	0.10	1952.71	1997.17

Note. χ^2= Chi-Square Statistic, df = degrees of freedom; TLI = Tucker Lewis Index; CFI = Comparative Fit Index; AIC = Akaike Information Criterion; BIC = Bayesian Information Criterion; SRMR = Standardized Root Mean Square Residual; RMSEA = Root Mean Square Error of Approximation

Figure 1

Model of Parent ES in the Indian Cultural Context based on Prior Research

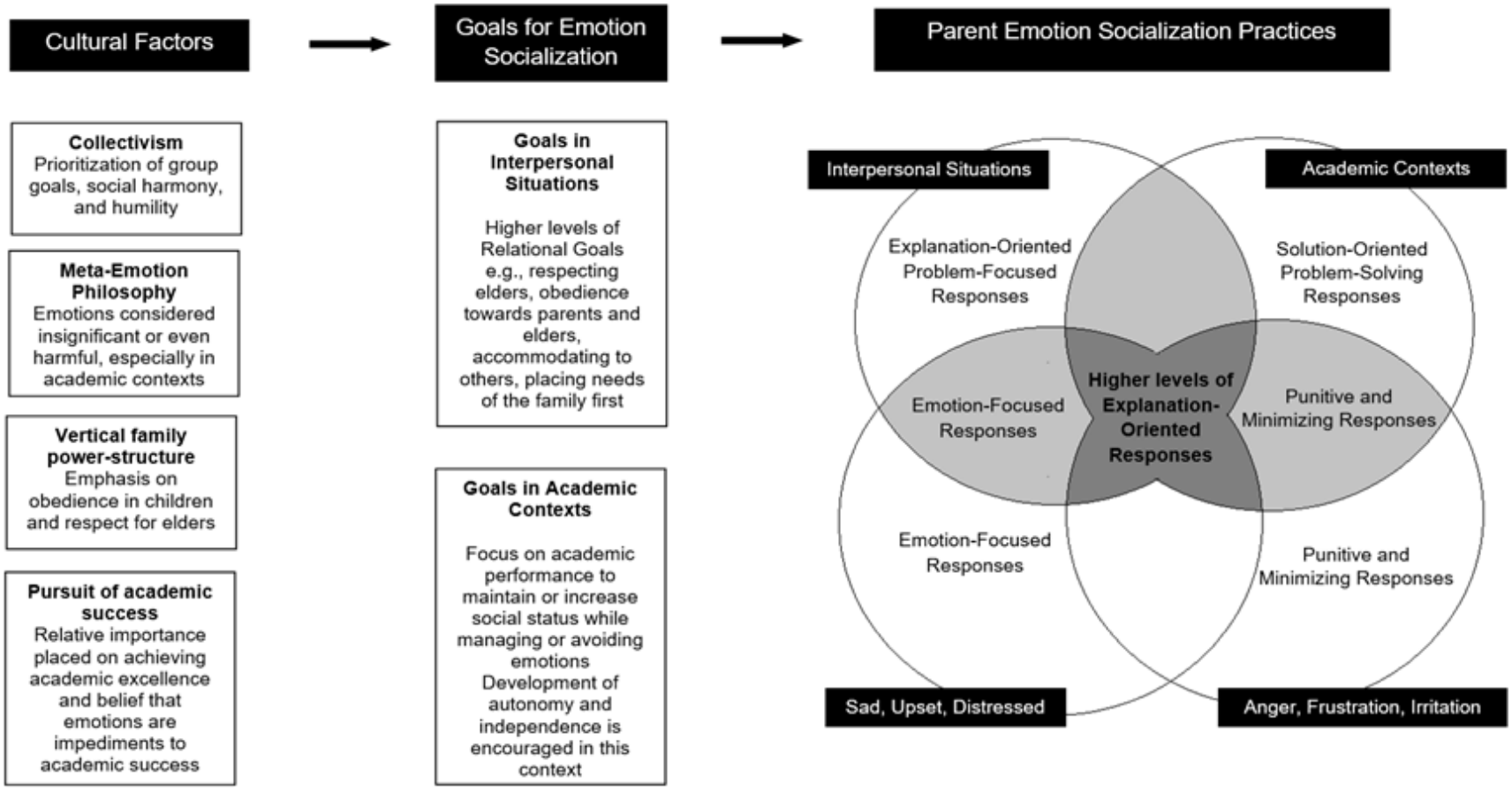


Figure 2

3-Factor Model of ES Practices Among Parents in India

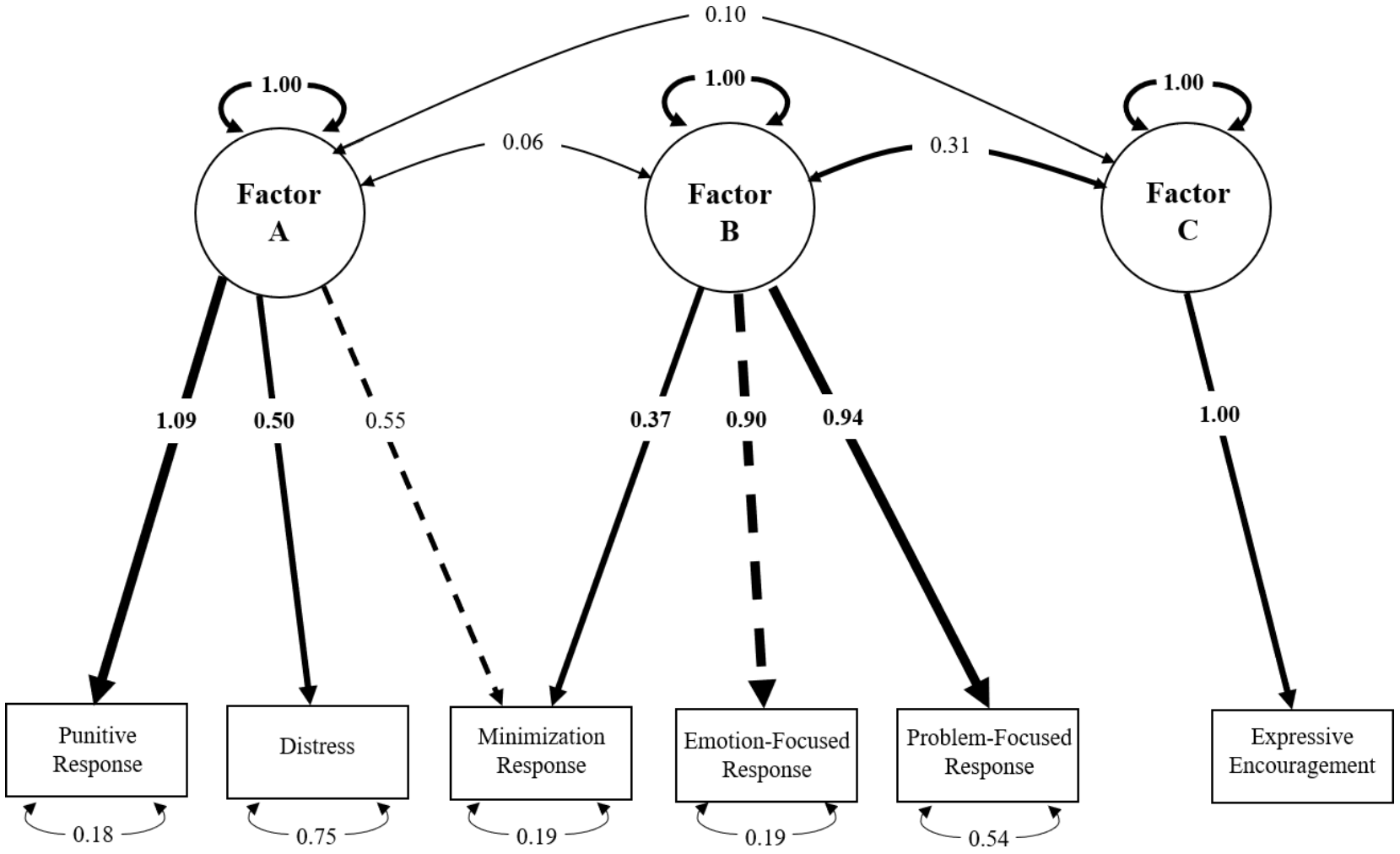
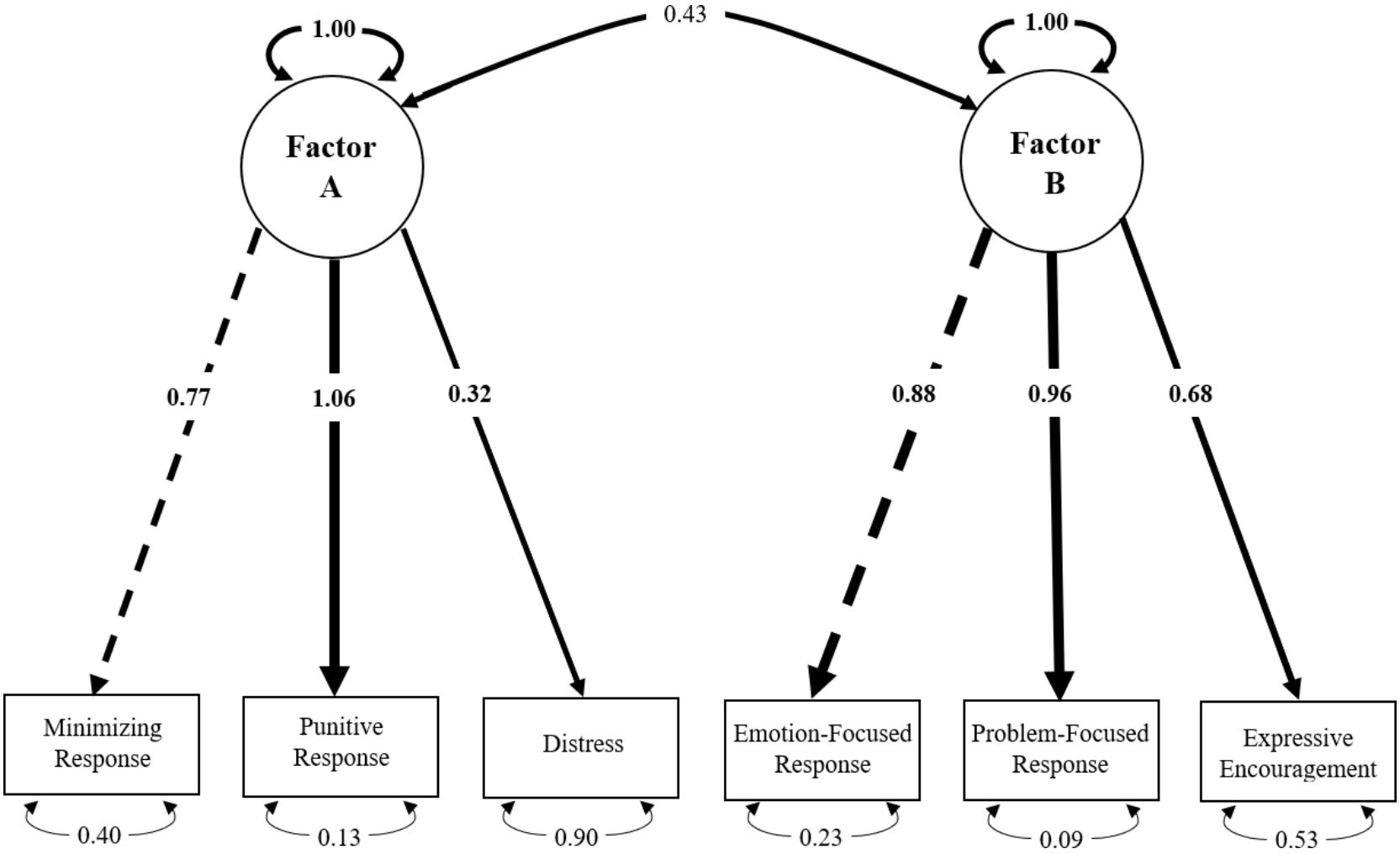


Figure 3

2-Factor Model of ES Practices Among White Parents in the US



Appendix A

Emotion Socialization Coding System (adapted from Lugo-Candelas et al., 2015)

*This coding system is designed to rate parents' use of a variety of parenting practices related to emotion socialization. This coding scheme has three main sections. The first two sections (Expression of Emotion and Discussion of Emotion) are coded for all segments. The third section (Parental Reactions to Children's Negative Affect) is only used if **any** child negative affect is present during the coded segment. Most behaviors are coded both for frequency and intensity/quality. Each code is described in detail below. Here are general instructions for completing the coding:*

- *Divide each 4-minute video into 15-second epochs*
- *Make ratings after every fifteen second epoch (use a timer/stopwatch).*
- *After listening to the entire 4-minute video once, rate codes described in the first two sections of the code (Expression of Emotion and Discussion of Emotion). If **any** children expressed negative affect during any of the 15-second epochs in the 4-minute video, go back and listen to the 4-minute video a second time, rating parent behavior using the Parental Reactions to Children's Negative Affect section for every epoch in which a child affect code was assigned.*
- *Most codes are rated both for intensity and frequency. If intensity of a code varies across the epoch, you should rate the average intensity across the epoch.*
- *On the coding sheet, please note the counter # and the last statement that you heard at the end of the epoch.*
- *Make each rating on a scale from 1 to 7. Anchors are provided for ratings of 1, 3, 5, and 7. Ratings of 2, 4, and 6 would reflect behavior that falls between two anchors.*

PARENTAL EXPRESIVITY AND CHILDREN'S EXPRESIVITY

Child Negative Affect: Rate the degree to which the **target child** seems distressed, frustrated, angry, hostile, sad, or in other ways demonstrates unhappiness and displeasure. Behaviors that are indicative of negative affect include crying, pouting, throwing objects, stomping feet, yelling, screaming, etc. Rate both the frequency and intensity of negative affect. Strong instances of negative affect include temper tantrums, intense crying, screaming, storming out of the room, and other hostile behaviors. Weaker instances of negative affect include whining and pouting.

I- - - - - - -I- - - - - - -I----------I- - - - - - -I- - - - - - -I- - - - - - -I
1 2 3 4 5 6 7

Frequency	Intensity
1. No instances of negative affect	1. No instances of negative affect
3. Sometimes expresses negative affect	3. Mild negative affect
5. Often expresses negative affect	5. Moderate negative affect
7. Very often expresses negative affect	7. Strong negative affect

Parent Negative Affect: Rate the extent to which the **parent** expresses negative affect during the segment. Negative affect would include irritation, annoyance, frustration (i.e. repeated sighing), sadness, and/or anger. Strong instances of negative affect include yelling, verbally expressing irritation/ annoyance and other hostile or angry behaviors. Milder instances of negative affect include sighing from frustration, or using an annoyed tone. Include negative affect that is not expressed directly toward the child.

I- - - - - - -I- - - - - - -I----------I- - - - - - -I- - - - - - -I- - - - - - -I
1 2 3 4 5 6 7

Frequency	Intensity
1. No instances of negative affect	1. No instances of negative affect
3. Sometimes expresses negative affect	3. Mild negative affect
5. Often expresses negative affect	5. Moderate negative affect
7. Very often expresses negative affect	7. Strong negative affect

Child Positive Affect: Rate the degree to which the **target child** expresses positive emotions including happiness, joy, excitement, satisfaction, pleasure, and contentment. Also include expressions of positive emotion toward others, including warmth, affection, and caring.

I- - - - - - -I- - - - - - -I----------I- - - - - - -I- - - - - - -I- - - - - - -I
1 2 3 4 5 6 7

Frequency	Intensity
1. No instances of positive affect	1. No positive affect
3. Sometimes expresses positive affect	3. Mild positive affect

5. Often positive expresses affect	5. Moderate positive affect
7. Very often expresses positive affect	7. Strong positive affect

Parent Positive Affect: Rate the degree to which the parent expresses positive emotions including happiness, joy, excitement, satisfaction, pleasure, and contentment. Also include expressions of positive emotion toward others, including warmth, affection, and caring.

I- - - - - -I- - - - - -I----------I- - - - - -I- - - - - -I- - - - - -I
1 2 3 4 5 6 7

Frequency	Intensity
1. No instances of positive affect	1. No positive affect
3. Sometimes expresses positive affect	3. Mild positive affect
5. Often expresses positive affect	5. Moderate positive affect
7. Very often expresses positive affect	7. Strong positive affect

PARENTAL REACTIONS TO CHILDREN'S NEGATIVE EMOTIONS

The following codes ***should only be rated if the child expresses negative affect during any of the epochs in the 4-minute video.***

If no child negative affect was present, check the "No child negative affect" box and rate both sets of the codes in this section as N/A during the epochs.

*Please note that your ratings should be based solely on the parents' reaction to the child's negative affect—****not to behavior that occurs at other times during the interaction in reaction to other child behaviors****.*

Remember, ratings in this section should be made after listening to the 4-minute video ***a second time*** *(not during your first time listening).*

Parental Distress in Reaction to Child Negative Affect*:* Rate the degree to which the parent seems upset in response to the child's' negative affect. This can include displays of anger, frustration, annoyance, embarrassment, or stress in response to the child's negative affect. You should take into account both the frequency and intensity with which the parent displays distress.

I- - - - - -I- - - - - -I----------I- - - - - -I- - - - - -I- - - - - -I
1 2 3 4 5 6 7

Frequency	Intensity
1. Not at all upset	1. Not at all upset
3. Sometimes upset	3. Mildly upset
5. Often upset	5. Moderately upset
7. Very often upset	7. Very upset

Punitive Reaction: The degree to which the parent punishes the child for expressing negative emotion or threatens to punish the child if he/she doesn't stop expressing negative emotion. This would not include punishment or threatening punishment for other misbehavior that may coincide with the negative emotion. For example, if the parent sends the child to timeout for hitting during a temper tantrum, this would not be considered a punitive reaction. If the parent tells the child he/she will have to go to timeout if he/she doesn't calm down, this would count as a punitive reaction. Higher ratings should be given for giving consequences than for threatening consequences.

Examples:

Mild punishment: "Go to your room for a few minutes," "You have to stop playing with your toy until you are calm."

Moderate punishment: "Go to time out," "No dessert if you can't calm down."

Severe punishment: "You can't go to the birthday party on Saturday," "You can't play with that toy for a week."

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1 2 3 4 5 6 7

Frequency	Intensity
1. Does not punish or threaten to punish the child in response to negative affect	1. Does not punish or threaten to punish the child in response to negative affect
3. Sometimes punishes or threatens to punish the child in response to negative affect	3. Gives or threatens a mild punishment
5. Often punishes or threatens to punish the child in response to negative affect	5. Gives or threatens a moderate punishment
7. Very often punishes or threatens to punish the child in response to negative affect	7. Gives or threatens a severe punishment

Expressive Encouragement in Reaction to Child Negative Affect*.* Please rate the degree to which the parent encourages the child to express negative affect and/or the degree to which the

parent validates the child's negative emotional state. Emotion encouragement can consist of a number of techniques, such as labeling the emotion, expressing understanding, teaching the child appropriate and alternative ways of expressing emotion, or quietly being with the child in a supportive way while he/she is upset. Rate both the frequency and intensity of the parent's encouraging/validating behavior.

Examples:

Labeling the emotion: "I can see how sad you are right now"

Expressing understanding: "I understand that you must be really sad that your sister won't share her toy, because I know how much you love to play with that toy"

Teaching the child appropriate and alternative ways of expressing emotion: "It is OK for you to cry when you are upset, but you can't scream like that"

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1 2 3 4 5 6 7

Frequency	Intensity
1. Does not encourage the child to express negative affect or validate child's emotion	1. Does not encourage the child to express negative affect or validate child's emotion
3. Sometimes encourages or validates the child's emotion	3. Mildly encouraging/validating
5. Often encourages or validates the child's emotion	5. Moderately encouraging/validating
7. Very often encourages or validates the child's emotion	7. Very encouraging/validating

Emotion-focused Reactions in Response to Child Negative Affect. Please rate the degree to which the parent engages in behaviors designed to help the child feel better, without minimizing the child's feelings. This might include hugging the child, soothing the child, comforting the child, suggesting that the child do something relaxing like counting or taking a deep breath. This would not include a parent telling a child to stop being upset (but could include saying, "Don't worry, it's ok.")

Examples:

A mother comforts her child after he/she has woken up from a nightmare.

A boy falls down and is crying and his mother goes over to hug him and says calming/soothing things.

A father comforts one son after his sibling has taken something from him.

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1 2 3 4 5 6 7

Frequency	Quality (only rate if frequency > 1)
1. Does not try to make the child feel better	1. Uses methods of trying to help the child feel better that are low in quality
3. Sometimes tries to help the child feel better	3. Uses methods of trying to help the child feel better that are somewhat low in quality
5. Often tries to help the child feel better	5. Uses methods of trying to help the child feel better that are moderate in quality
7. Very often tries to help the child feel better.	7. Uses methods of trying to help the child feel better that are high in quality

Problem-focused Reactions in Response to Child Negative Affect. Please rate the degree to which the parent tries to solve the problem that is causing the child's distress. (Note that if the parent suggests a compromise, it should be coded as compromise, and not as problem solving.)

Examples

A child is frustrated because his/her Lego contraption keeps falling over; the parent might suggest adding another support to the contraption.

A child is unable to open a toy and gets frustrated. The parent goes over and helps the child open it.

A child is angry about having to wear a seat belt. The parent adjusts the seat belt so that it does not bother the child.

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1 2 3 4 5 6 7

Frequency	Quality (only rate if frequency > 1)
1. Does not try to problem solve	1. Uses problem solving strategies that are low in quality
3. Sometimes tries to problem solve	3 Uses problem solving strategies that are somewhat low in quality
5. Often tries to problem solve	5. Uses problem solving strategies that are moderate in quality
7. Very often tries to problem solve.	7. Uses problem solving strategies that are high in quality

Minimizing/discouraging Expression of Emotion in Response to Child Negative Affect. Please rate the degree to which the parent minimizes the seriousness of the situation, devalues the child's problem or negative affect, scolds the child for expressing their negative emotions, or tells the child to stop expressing negative emotion. If the parent discusses or offers an alternative way of expressing the negative emotions, you should not code the instance as minimizing/discouraging.

*Note that the difference between this code and emotion-focused reaction is an important but subtle one. The difference often has to do with the tone of voice of the parent. A parent who is trying to help the child feel better would be rated highly on emotion-focus reaction, whereas a parent who is simply trying to squelch emotion would be coded as minimizing/discouraging.

Examples:

"There is nothing to be upset about"

"Stop overreacting"

"You're making a big deal out of nothing."

"Stop being a baby."

"Stop crying."

"Knock it off."

"Stop whining."

"What's the matter with you?" (in a critical tone)

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1 2 3 4 5 6 7

Frequency	Intensity
1. Does not minimize or discourage emotion expression	1. Does not minimize or discourage emotion expression
3. Sometimes minimizes or discourages emotion expression	3. Subtly minimizes or discourages emotion expression
5. Often minimizes or discourages emotion expression	5. Clearly minimizes or discourages emotion expression
7. Very often minimizes or discourages emotion expression	7. Strongly minimizes or discourages emotion expression

Positive Thinking in Response to Child Negative Affect. Please rate the degree to which the parent tries to focus on the positive, rather than the negative aspect of an event that occurred. These are instances in which the parent tries to help the child change how he or she thinks about events, and casts them in a more positive light. Note: the parent still may or may not be validating the child's emotion, but the parent is trying to help the child think differently about the situation. Only code instances in which the parent is using positive thinking strategies that are high in quality. If the parent is dismissing the child's emotions, code under Minimizing/discouraging expression of emotion in response to child negative affect.

Examples:

A child is crying because the child lost in a card game and the parent says, "Well, it's only a game, right?"

A child falls down, cuts his/her thumb, and said how much it hurt. The parent put a band-aid on it and said "Well, remember the time you fell off your bike, I bet that hurt more than this time, right?"

"Ooh, that looks like it really hurts. I'm so sorry you got hurt. Let's get that cleaned up and put a band-aid on it—I bet it will feel better in no time."

Frequency
1. Does not try to help the child focus on the positive
3. Sometimes tries to help the child focus on the positive.
5. Often tries to help the child focus on the positive.
7. Very often tries to help the child focus on the positive.

Limit-Setting in Response to Child Negative Affect. Please rate the degree to which the parent responds to the child's negative affect by setting a limit. This might involve telling the child he/she can't have something/do something or telling the child that the child has to do something. For example, if a child is upset that he/she cannot have a cookie, the parent firmly states that the child cannot have the cookie and does not give in to the request. Limit setting does not imply or include parental distress, punitive reactions, or minimization of child negative affect. If any of these occur, they should be coded separately.

Examples:

A child is being told to go to sleep. He whines and asks for 5 more minutes. The parent says no and puts the child to sleep.

A mother asks a child to help clean; the child complains that he/she helped last night. The parent insists that the child has to clean every night.

A child is fighting with his sibling over the remote control and gets upset. The parent says the child will have to wait his turn to choose programs.

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Frequency	Quality (only rate if frequency > 1)
1. Does not set limits	1. Uses limit setting strategies that are low in quality
3. Sometimes sets limits	3 Uses limit setting strategies that are somewhat low in quality
5. Often set limits	5. Uses limit setting strategies that are moderate in quality

7. Very often sets limits	7. Uses limit setting strategies that are high in quality

Parental compromises in response to Child Negative Affect. Please rate the degree to which the parent responds to the child's negative affect by offering a compromise. This might involve telling the child he/she can't have something/do something but suggesting a suitable substitution. The parent tries to resolve the issue upsetting the child by meeting the child's requests at a middle point where both are satisfied. Even if child does not accept the proposal, parental attempts at reaching compromises should be coded. Parental compromises do not imply or include parental distress, punitive reactions, or minimization of child negative affect. If any of these occur, they should be coded separately.

Examples:

If a child is upset that he/she cannot have a cookie, the parent firmly states that the child cannot have the cookie but offers an apple instead.

A child does not want to go to sleep. The parent says he/she will read her a story if the child promises to go to sleep after that.

A parent needs to run errands. The child wants to stay home. The parent says he/she will stop for ice cream if the child comes along and behaves.

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Frequency	**Quality (only rate if frequency > 1)**
1. Does not try to reach compromises	1. Uses comprising strategies that are low in quality
3. Sometimes tries to reach compromises	3 Uses comprising strategies that are somewhat low in quality
5. Often tries to reach compromises	5. Uses comprising strategies that are moderate in quality
7. Very often tries to reach compromises	7. Uses comprising strategies that are high in quality

Parent "Gives In" in response to Child Negative Affect. Please rate the degree to which the parent responds to the child's negative affect by giving in to the child's requests/wishes in order to assuage child negative affect. Even if child negative affect does not lessen after the parent gives in, this should be coded. *Note: the difference between solving a child's problem and

giving in to his/her wishes is often subtle. Giving in implies that the parent does/allows something he/she was not planning/wanting to do that the child is expressly demanding.

Examples:

If a child is upset that he/she cannot have a cookie, the parent gives in and allows the child to have the cookie.

A mother reads a child a bedtime story. When she is done, the child complains and whines until the mother reads him/her another one.

A child is in backseat screaming at mother to stop and get some fast food. In order to soothe the child, the mother agrees to do so.

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1 2 3 4 5 6 7

Frequency
1. Does not give in to child wishes
3. Sometimes gives in to child wishes
5. Often gives in to child wishes
7. Very often tries gives in to child wishes

Parent Argues with child in response to Child Negative Affect. Please rate the degree to which the parent responds to the child's negative affect by getting into an argument with the child about the problem that the child is upset about. Parental arguments do not imply or include parental distress, punitive reactions, or minimization of child negative affect. If any of these occur, they should also be coded.

Examples:

If a child is upset that he/she cannot have a cookie, the parent starts an argument about why the child cannot have the cookie/ how the child is misbehaving/etc.

A mom asks a child to pick up his/her toys. The child says he has already done so, in a nasty tone. The mother starts lecturing.

A mother asks a boy to get out of the tub. The boy refuses and screams. The mother starts arguing that the boy always gets water all over the floor and that he uses too much soap.

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1 2 3 4 5 6 7

Frequency

1. Does not argue with child about the problem causing negative affect
3. Sometimes argues with child about the problem causing negative affect
5. Often argues with child about the problem causing negative affect
7. Very often argues with child about the problem causing negative affect

Parent Reasoning/Clarifying in response to Child Negative Affect. Please rate the degree to which the parent responds to the child's negative affect using reasoning or by working together with the child to clear up a misunderstanding. The difference between arguing and reasoning is typically a difference of tone.

*Note: Parental reasoning/clarification does not imply or include parental distress, punitive reactions, or minimization of child negative affect. If any of these occur, they should be coded separately. The difference between parent reasoning/clarifying and compromise is that reasoning/clarifying simply explains the reason why a child can or can't do something whereas compromise involves suggesting another alternative.

Examples:

A child is upset that he/she cannot have a cookie, the parent talks with the child about why the child cannot have the cookie at that moment because cookies are not breakfast, etc.

A child whines, "I don't want orange juice!" and the parent says, "Well what do you want to drink?"

A child screams, "I don't want to wear sneakers!" The parents say, "Don't you want to be able to run around the jungle gym with your friends?"

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1 2 3 4 5 6 7

Frequency	**Quality (only rate if frequency > 1)**
1. Does not try to clarify/reason with child in response to negative affect	1. Uses clarifying /reasoning strategies that are low in quality
3. Sometimes tries to clarify/reason with child in response to negative affect	3 Uses clarifying /reasoning strategies that are somewhat low in quality

5. Often tries to clarify/reason with child in response to negative affect	5. Uses clarifying /reasoning strategies that are moderate in quality
7. Very often tries to clarify/reason with child in response to negative affect	7. Uses clarifying /reasoning strategies that are high in quality

Parent Redirection in response to Child Negative Affect. Please rate the degree to which the parent responds to the child's negative affect by redirecting the child's attention in order to assuage child's distress. Even if child negative affect does not lessen after the parent tries to re-direct its attention, redirection should be coded. Parental redirection does not imply or include parental distress, punitive reactions, or minimization of child negative affect. If any of these occur, they should also be coded.

Examples:

If a child is upset that he/she cannot have a cookie, the parent talks to the child about a cartoon, gives the child a toy, or does any other attempt at distracting child from the source of conflict/negative affect.

A child is frustrated that his sister won't share her toy. The parent goes over and stars playing with him with a different toy.

A child falls over and starts screaming, the parent comes over and distracts the child by telling him/her to look at the birds nearby.

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Frequency	**Quality (only rate if frequency > 1)**
1. Does not try to redirect the child's attention from source of conflict	1. Uses redirection strategies that are low in quality
3. Sometimes tires to redirect the child's attention from source of conflict	3 Uses redirection strategies that are somewhat low in quality
5. Often tries to redirect the child's attention from source of conflict	5. Uses redirection strategies that are moderate in quality
7. Very often tries to redirect the child's attention from source of conflict	7. Uses redirection strategies that are high in quality

1 2 3 4 5 6 7

Parent DOES NOT RESPOND to Child Negative Affect. Please rate the degree to which the parent does not responds to the child's negative affect. The parent should completely ignore the child negative affect (but does not necessarily ignore the child). If the parent redirect' the child's attention, argues with the child, is distressed, or minimizes child negative affect, this code does not apply. If any of these occur, they should be coded separately. *Note: Minimizing involves

actively dismissing child negative anger; although not responding implies, to some extent, minimization, please code separately.

Example

If a child is upset that he/she cannot have a cookie, the parent continues doing what he/she was previously doing, talks to other people, etc., and does not acknowledge either the tone or content of the expressed negative affect.

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1 2 3 4 5 6 7

Frequency
1. Does not ignore child negative affect
3. Sometimes ignores child negative affect
5. Often ignores child negative affect
7. Very often ignores child negative affect

Appendix B

Themes and Codes identified during Qualitative Thematic Coding of Parent Interviews

Theme	Codes	Description
Level of Support	Guidance provided when needed	Parent reports providing/aiming to provide assistance only when needed or when their toddlers asks for assistance during activities with their toddlers
	Guidance always provided	Parent reports always assisting and guiding their toddler during activities regardless of whether the toddler asks or seems like in need of help
	Protective/Ensuring Safety	Parent reports that their role in terms of providing assistance during activities with their toddlers, is only to ensure that their toddler stays safe
Objective	Development of independence/autonomy	Parent endorses that their goal for these activities is to enable their toddler to develop independence and autonomy
	Educational/to learn	Parent endorses that their goal for these activities is to ensure that their toddler learns/that the activity prepares them for school
	Self-discovery/developing a sense of self	Parent endorses that their goal for these activities is to help their toddler develop a sense of self by recognizing who they are and what they like
	Foster creativity	Parent endorses that their goal for these activities is to assist their toddler in developing creativity
	Spending time with child	Parent endorses that their objective for these activities is to spend quality time with their toddler/develop the parent-child relationship
	Fun	Parent endorses that their objective is for their toddler to have fun and enjoy themselves during these activities
	Emotion Regulation	Parent endorses that their goal is for their toddler to learn how to manage and regulate their emotions through these activities

	Behavior Regulation	Parent endorses that their goal for their toddler is to control and manage their behaviors during these activities
	Self-expression	Parent endorses that their objective is to allow their toddler to be able to express themselves though these activities
	Achievement	Parent endorses that their objective for these activities is to prepare their child for success in the future
Lead	Follow child's lead	Parent states that they take the lead the majority of the time in these activities with their toddlers
	Follow parent's lead	Parent states that they allow their toddler to take the lead for the majority of the time in these activities with their toddlers
	Both lead	Parent states that both their toddler and they take the lead depending on the activity and the situation
Parenting Behaviors	Commanding obedience	Parent mentions that their goal for parenting is to ensure that they command obedience from their child
	Distraction as a coping mechanism	Parent mentions that their goal for parenting is to help their child navigate negative emotions by distracting them from the present situation
	Praise	Parent states that their goal for parenting is to offer praise and ensure that their child feels appreciated

Appendix C
Parent Self-Report on Socialization Goals

1 Strongly Disagree	2 Disagree	3 Slightly Disagree	4 Slightly Agree	5 Agree	6 Strongly Disagree

During the first 3 years of life, children should:

1. Develop independence
   1 2 3 4 5 6

2. Develop self-confidence
   1 2 3 4 5 6

3. Learn to obey their parents
   1 2 3 4 5 6

4. Become assertive
   1 2 3 4 5 6

5. Learn to obey elderly people
   1 2 3 4 5 6

6. Learn to care for the wellbeing of others
   1 2 3 4 5 6

7. Develop a sense of self-esteem
   1 2 3 4 5 6

8. Learn to help others (mothers, siblings)
   1 2 3 4 5 6

9. Learn to cheer up others
   1 2 3 4 5 6

10. Develop competitiveness
    1 2 3 4 5 6

11. Develop a sense of self
    1 2 3 4 5 6

Appendix D

Early Childhood Behavior Questionnaire (Rothbart, 2006)

As you read each description of the child's behavior below, please indicate how often the child did this during the last two weeks by circling one of the numbers in the right column. These numbers indicate how often you observed the behavior described during the last two weeks.

1	2	3	4	5	6	7	NA
Never	**Very rarely**	**Less than half the time**	**About half the time**	**More than half the time**	**Almost always**	**Always**	**Does not apply**

The "Does Not Apply" column (NA) is used when you did not see the child in the situation described during the last two weeks. For example, if the situation mentions the child going to the doctor and there was no time during the last two weeks when the child went to the doctor, circle the (NA) column. "Does Not Apply" (NA) is different from "NEVER" (1). "Never" is used when you saw the child in the situation but the child never engaged in the behavior mentioned in the last two weeks. Please be sure to circle a number or NA for every item.

When approached by an unfamiliar person in a public place (for example, the grocery store), how often did your child

1. cling to a parent?

1 2 3 4 5 6 7 NA

While having trouble completing a task (e.g., building, drawing, dressing), how often did your child

2. get easily irritated?

1 2 3 4 5 6 7 NA

When a familiar child came to your home, how often did your child

3. seek out the company of the child?

1 2 3 4 5 6 7 NA

When offered a choice of activities, how often did your child

4. decide what to do very quickly and go after it?

1	2	3	4	5	6	7	NA

During daily or evening quiet time with you and your child, how often did your child

5. enjoy just being quietly sung to?

1	2	3	4	5	6	7	NA

While playing outdoors, how often did your child

6. choose to take chances for the fun and excitement of it?

1	2	3	4	5	6	7	NA

When engaged in play with his/her favorite toy, how often did your child

7. play for more than 10 minutes?

1	2	3	4	5	6	7	NA

8. continue to play <u>while at the same time</u> responding to your remarks or questions?

1	2	3	4	5	6	7	NA

When told that loved adults would visit, how often did your child

9. get very excited?

1	2	3	4	5	6	7	NA

During quiet activities, such as reading a story, how often did your child

10. fiddle with his/her hair, clothing, etc.?

1	2	3	4	5	6	7	NA

While playing indoors, how often did your child

11. like rough and rowdy games?

1	2	3	4	5	6	7	NA

When being gently rocked or hugged, how often did your child

12. seem eager to get away?

1	2	3	4	5	6	7	NA

When encountering a new activity, how often did your child

13. get involved immediately?

1	2	3	4	5	6	7	NA

When engaged in an activity requiring attention, such as building with blocks, how often did your child

14. Tire of the activity relatively quickly?

1 2 3 4 5 6 7 NA

During everyday activities, how often did your child

15. pay attention to you right away when you called to him/her?

1 2 3 4 5 6 7 NA

16. seem to be irritated by tags in his/her clothes?

1 2 3 4 5 6 7 NA

17. become bothered by sounds while in noisy environments?

1 2 3 4 5 6 7 NA

18. seem full of energy, even in the evening?

1 2 3 4 5 6 7 NA

While in a public place, how often did your child

19. seem afraid of large, noisy vehicles?

1 2 3 4 5 6 7 NA

When playing outdoors with other children, how often did your child

20. seem to be one of the most active children?

1 2 3 4 5 6 7 NA

When told "no", how often did your child

21. stop the forbidden activity?

1 2 3 4 5 6 7 NA

22. become sadly tearful?

1 2 3 4 5 6 7 NA

Following an exciting activity or event, how often did your child

23. seem to feel down or blue?

1 2 3 4 5 6 7 NA

While playing indoors, how often did your child

24. run through the house?

1 2 3 4 5 6 7 NA

Before an exciting event (such as receiving a new toy), how often did your child

25. get very excited about getting it?

1 2 3 4 5 6 7 NA

When s/he asked for something and you said "no", how often did your child

26. have a temper tantrum?

1 2 3 4 5 6 7 NA

When asked to wait for a desirable item (such as ice cream), how often did your child

27. wait patiently?

1 2 3 4 5 6 7 NA

When being gently rocked, how often did your child

28. smile?

1 2 3 4 5 6 7 NA

While being held on your lap, how often did your child

29. mold to your body?

1 2 3 4 5 6 7 NA

When a familiar adult, such as a relative or friend, visited your home, how often did your child

30. want to interact with the adult?

1 2 3 4 5 6 7 NA

When asked to do so, how often was your child able to

31. be careful with something breakable?

1 2 3 4 5 6 7 NA

When visiting a new place, how often did your child

32. not want to enter?

1 2 3 4 5 6 7 NA

When s/he was upset, how often did your child

33. cry for more than 3 minutes, even when being comforted?

1	2	3	4	5	6	7	NA

34. become easily soothed?

1	2	3	4	5	6	7	NA

When you were busy, how often did your child

35. find another activity to do when asked?

1	2	3	4	5	6	7	NA

When around large gatherings of familiar adults or children, how often did your child

36. enjoy playing with a number of different people?

1	2	3	4	5	6	7	NA

Appendix E

Parent's Beliefs About Children's Emotions (Halberstadt et al., 2008)

These statements express different beliefs about children's emotional development and about parents' roles in helping children with their emotions. Please read each statement and write in the number that shows how much you agree with the statement.

1 Strongly Disagree	2 Somewhat Disagree	3 Slightly Disagree	4 Slightly Agree	5 Somewhat Agree	6 Strongly Agree

Number	Item	Answer
1	Getting mad can help children do things they need to, like sticking with a task that's hard, or standing up for themselves.	
2	It is okay when children feel angry, and it is okay when they don't.	
3	Showing emotions isn't a good thing or a bad thing, it's just part of being human.	
4	It's good for the family when children share their positive emotions.	
5	It is important for children to be able to show when they are happy.	
6	It is important for children to express their happiness when they feel it.	
7	Feeling sad sometimes is just a part of life.	
8	It is good for children to feel sad at times.	
9	Feeling negative emotions is sort of a dead end street, and children should do whatever they can to avoid going down it.	
10	Showing anger is not a good idea for children.	
11	Feeling all emotions is a part of life, like breathing.	
12	When children get angry they create more problems for themselves.	
13	It is important for children to develop lots of ways to be happy.	
14	Feeling angry sometimes is just a part of life.	

15	Feeling sad is just not good for children.	
16	It is important for children to show others when they feel upset.	
17	It is okay when children feel sad, and it is okay when they don't.	
18	When children are too loving others take advantage of them.	
19	Children who are too loving can get walked all over.	
20	Children's anger can be a relief to them, like a storm that clears the air.	
21	It is useful for children to feel angry sometimes.	
22	Joy is an important emotion to feel.	
23	Feeling angry is just not good for children.	
24	Sometimes it is good for a child to sit down and have a good cry.	
25	When children get angry, it can only lead to problems.	
26	Having lots of joy is very important for a child.	
27	Showing sadness is neither bad nor good, it is just part of being human.	
28	When children are too happy, they can get out of control.	
29	When children show pride in what they have done, it is a good thing.	
30	It is good for children to let their anger out.	
31	When children show anger, they are letting you know that something is important to them.	
32	It is important for children to avoid feeling sad whenever possible.	
33	It is important for children to share their positive emotions with others.	
34	Being sad isn't "good" or "bad" -- it is just a part of life.	

35	It is important for children to feel pride in their accomplishments.	
36	Being angry isn't "good" or "bad" -- it just is a part of life.	
37	It is important for children to be proud of a job well done.	
38	Feeling sad helps children to know what is important to them.	
39	When children express anger, someone in the family ends up having to deal with the consequences.	
40	Anger in children can be emotionally dangerous.	
41	Children who feel emotions strongly are likely to face a lot of trouble in life.	
42	The experience of anger can be a useful motivation for action.	
43	It is okay when children feel happy, and it is okay when they don't.	
44	Children can think more clearly when emotions don't get in the way	
45	Children's feelings can get hurt if they love too much.	
46	Being angry can motivate children to change or fix something in their lives.	
47	It is okay if children show they are happy, and it's okay if they don't.	
48	Expressing anger is a good way for a child to let his/her desires and opinions be known.	
49	When children start to show strong emotions, one never knows where it will end up.	

Appendix F

Coping with Toddler's Negative Emotions Scale (Spinrad et al., 2007)

CTNES: For the following items, please the likelihood that you would respond in the ways listed for each item. Please read each item carefully and respond as honestly and sincerely as you can. For each question, please fill in a circle for **each** item (a-g).

1. **If my child becomes angry because he wants to play outside and cannot do so because he is sick, I would:**

a. Feel upset myself
b. Tell my child we will not get to do something else fun (i.e., watch t.v., play games) unless he stops behaving like
c. Tell my child it's ok to be angry
d. Soothe my child and/or do something with him to make him feel better
e. Help my child find something he wants to do inside.
f. Tell my child that he is making a big deal out of nothing
g. Let my child play outside

2. **If my toddler spilled something and made a big mess on the carpet, and then gets upset and cries, I would:**

a. Comfort my child by picking him up and/or trying to get him to forget about the accident
b. Tell my child that he is overreacting or making a big deal out of nothing
c. Remain calm and not let myself get upset
d. Send my child to his room for making a mess
e. Help my child find a way to clean up the mess
f. Tell my child that it is ok to be upset

3. **If my child loses some prized possession (for example, favorite blanket or stuffed animal) and reacts with tears, I would:**

a. Go and buy my child a new item
b. Help my child think of other places to look for the toy
c. Distract my child with another toy to make him feel better
d. Tell my child that it is not that important
e. Tell my child it is his fault for not being careful with the toy
f. Feel upset myself
g. Tell my child it is okay to feel sad about the loss

4. **If my child is afraid of going to the doctor or of getting shots and becomes quite shaky and teary, I would:**

a. Tell him to shape up or he won't be allowed to do something he likes to do (i.e., go to playground)
b. Tell my child that it is ok to be nervous or afraid
c. Tell my child that it's really no big deal
d. Comfort my child before and/or after the shot
e. Leave the doctor's office and reschedule for another time
f. Help him think of ways to make it less scary, like squeezing my hand when he gets a shot
g. Get nervous myself

5. **If my child is going to spend the afternoon with a new babysitter and becomes nervous and upset because I am leaving him, I would:**

a. Distract my child by playing and talking about all of the fun he will have with the sitter
b. Feel upset or uncomfortable because of my child's reactions
c. Tell my child that he won't get to do something else enjoyable (i.e., go to playground, get a special snack) if he doesn't stop behaving like that
d. Tell him that it's nothing to get upset about
e. Change my plans and decide not to leave my child with the sitter
f. Help my child think of things to do that will make it less stressful, like me calling him once during the evening
g. Tell my child that it's ok to be upset

6. **If my child becomes upset and cries because he is left alone in his bedroom to go to sleep, I would:**

a. Become upset myself
b. Tell my child that if he doesn't stop crying, we won't do something fun when he wakes up
c. Tell my child it's okay to cry when he is sad
d. Soothe my child with a hug or kiss
e. Help my child find ways to deal with my absence (hold a favorite stuffed animal, turn on a nightlight, etc)
f. Stay with my child or take him out of the bedroom to be with me until he falls asleep
g. Tell him that there is nothing to be afraid of

7. If my child becomes angry because he is not allowed to have a snack (i.e., candy, ice cream) when he wants it, I would:

a. Send my child to his room

b. Give my child the snack that he wanted

c. Distract child by playing with other toys or games

d. Tell him that there is no reason to be upset

e. Tell my child it's okay to feel angry

f. Help my child think of something to eat that he is allowed to have between meals

g. Feel angry at my child's behavior

8. If my child becomes upset because I removed something that my child should have not been playing with, I would:

a. Tell my child that if he touches it again he will not be allowed to do something enjoyable

b. Help my child think of something else to do that is fun

c. Become upset myself

d. Tell my child it's okay to feel angry

e. Distract my child with something else interesting

f. Give my child what he wants

g. Ignore my child's upset reactions and take the object away

9. If my child wants me to play with him and I cannot do so right then (i.e., I am on the phone, in the middle of a conversation with someone), and my child becomes upset, I would:

a. Feel upset myself

b. Tell my child that there is nothing to be upset about

c. Help my child find something to do while he waits for me to play with him.

d. Tell my child I won't play with him later if he doesn't stop behaving like that

e. Tell my child it's okay to be upset

f. Stop what I'm doing so I can play with my child

g. Soothe my child and talk to him to make him feel better

10. If my child is playing with a puzzle or shape sorter toy and cannot fit a piece correctly, and gets upset and cries, I would:

a. Remain calm and not let myself get anxious
b. Take the toy away from my child
c. Comfort my child with a pat or a kiss
d. Put the piece in for my child
e. Tell my child it's okay to get frustrated and upset
f. Help my child figure out how to put the piece in correctly
g. Tell my child it's nothing to cry about

11. If my child has climbed onto a piece of playground equipment and gets stuck, and becomes nervous and begins to cry, I would:

a. Become anxious myself
b. Help my child figure out how to get down from the climber
c. Take my child down from the climber
d. Tell my child he shouldn't have gone up by himself.
e. Tell my child its nothing to get upset about
f. Comfort my child with words or a pat
g. Tell my child it's okay to be afraid

12. If my child fell down and scraped himself while trying to get a favorite toy, I would:

a. Become upset myself
b. Help my child figure out how to feel better (getting a band-aid)
c. Distract my child with something else
d. Tell my child that he should be more careful
e. Tell my child its nothing to get upset about
f. Tell my child it's okay to cry

Appendix G

Strength and Difficulties Questionnaire Preschool Version (Goodman et al., 2003)

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain. Please give your answers on the basis of the child's behavior over the last six months or this school year.

Child's name ..... Male/Female

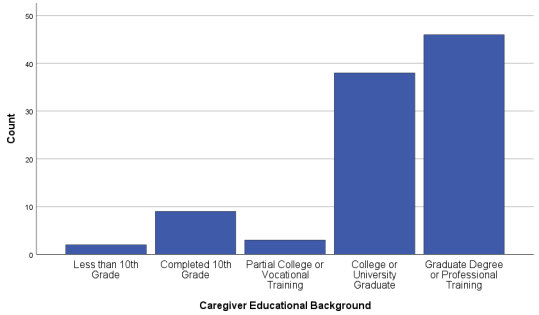
Date of birth.....

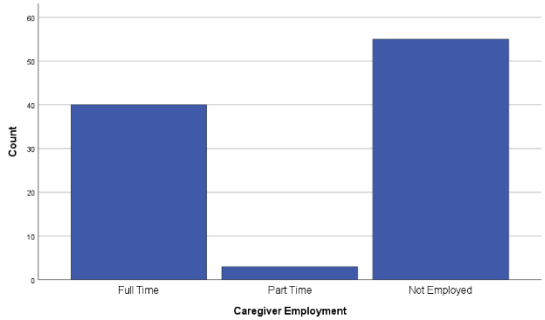
	Not True	Somewhat True	Certainly True
Considerate of other people's feelings	☐	☐	☐
Restless, overactive, cannot stay still for long	☐	☐	☐
Often complains of headaches, stomach-aches or sickness	☐	☐	☐
Shares readily with other children, for example toys, treats, pencils	☐	☐	☐
Often loses temper	☐	☐	☐
Rather solitary, prefers to play alone	☐	☐	☐
Generally well behaved, usually does what adults request	☐	☐	☐
Many worries or often seems worried	☐	☐	☐
Helpful if someone is hurt, upset or feeling ill	☐	☐	☐
Constantly fidgeting or squirming	☐	☐	☐
Has at least one good friend	☐	☐	☐
Often fights with other children or bullies them	☐	☐	☐
Often unhappy, depressed or tearful	☐	☐	☐
Generally liked by other children	☐	☐	☐
Easily distracted, concentration wanders	☐	☐	☐
Nervous or clingy in new situations, easily loses confidence	☐	☐	☐
Kind to younger children	☐	☐	☐
Often argumentative with adults	☐	☐	☐
Picked on or bullied by other children	☐	☐	☐
Often offers to help others (parents, teachers, other children)	☐	☐	☐
Can stop and think things out before acting	☐	☐	☐
Can be spiteful to others	☐	☐	☐
Gets along better with adults than with other children	☐	☐	☐
Many fears, easily scared	☐	☐	☐
Good attention span, sees work through to the end	☐	☐	☐

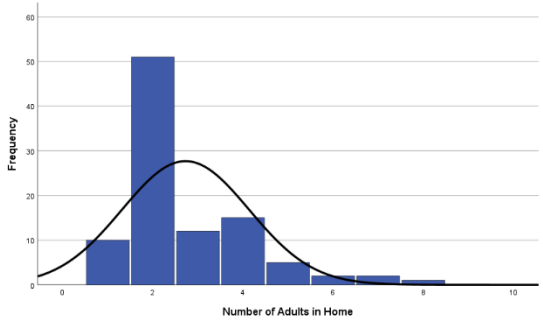
Appendix H

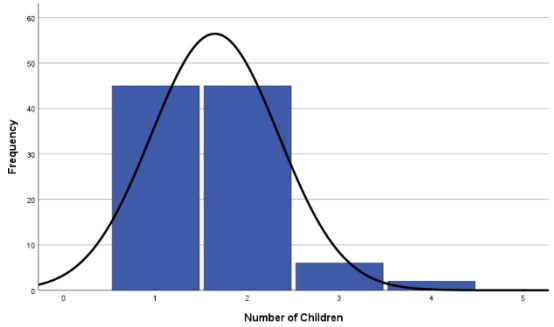
Study 2 Indian Subsample – Within Sample Variability

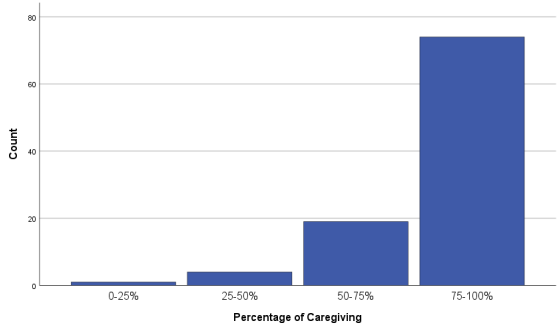
Household Variables	Mean or %	Median	SD	Variance	Range	Percentiles		
						25	50	75
Parent Educational Background	85.7% (University Graduate or Higher)	College or University Graduate	1.01	1.02	4.00	4.00	4.00	5.00
Parent Employment	56.1% (Not Employed)	Not Employed	0.99	0.96	2.00	1.00	3.00	3.00
Number of Adults in Home	2.73	2.00	1.41	2.00	7.00	2.00	2.00	4.00
Number of Children	1.64	2.00	0.69	0.48	3.00	1.00	2.00	2.00
Amount of Caregiving for Child	94.9% (More than 50%)	75-100%	0.59	0.36	3.00	3.75	4.00	4.00











Cultural Beliefs About Emotions

	Mean	Median	SD	Variance	Range	Percentiles 25	50	75
Positive Emotions are Good	5.42	5.60	0.69	0.47	4.90	5.10	5.60	5.90
Negative Emotions are Good	4.23	4.25	0.85	0.73	4.67	3.83	4.25	4.83
All Emotions are Bad	4.03	4.24	1.05	1.11	5.00	3.40	4.24	4.84
Emotions Just Are	5.28	5.56	0.81	0.66	5.00	4.89	5.56	5.89