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Positive psychology intervention: Building positive relationships between parents and children, a pilot study

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Η έγκριση της διπλωματικής εργασίας από το Πάντειον Πανεπιστήμιο Κοινωνικών και Πολιτικών Επιστημών δε δηλώνει αποδοχή των γνωμών του συγγραφέα.

Στη μαμά μου που μου έδειζε το χαρακτηριστικό μπορντό κτίριο από όταν ήμουν μικρή

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Ένα πλούσιο ταξίδι γνώσης, εμπειρίας, σχέσεων και συναισθημάτων ολοκληρώνεται και έτσι θα ήθελα να ευχαριστήσω κάποια πρόσωπα που η συμβολή τους και η βοήθειά τους ήταν αξιοσημείωτη. Σε αυτή την πορεία ολοκλήρωση του μεταπτυχιακού, θα ήθελα, καταρχάς, να ευχαριστήσω τον υπεύθυνο καθηγητή μου κ. Σταλίκα Αναστάσιο για την καθοδήγησή του, καθώς και τον επόπτη μου κ. Πεζηρκιανίδη Χρήστο για την πολύτιμη βοήθειά του, τις εποικοδομητικές συζητήσεις και για το ιδιαίτερο ενδιαφέρον του και τη διάθεσή του να συμπαρασταθεί σε όλη την προσπάθεια εκπόνησης της διπλωματικής μου εργασίας. Επίσης, θα ήθελα να ευχαριστήσω όλους του καθηγητές και συμφοιτητές μου στο μεταπτυχιακό πρόγραμμα σπουδών. Τέλος θα ήθελα να πω ένα μεγάλο ευχαριστώ στην οικογένειά μου, την μητέρα μου και τους φίλους μου για την αμέριστη στήριξή τους και την πολύτιμη βοήθειά τους.

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Περίληψη

Οι θετικές σχέσεις και η ευημερία διασταυρώνονται, καθώς η ανάγκη για σύνδεση με άλλους ικανοποιείται και τα δύο μέρη της σχέσης μπορούν να ανθίσουν. Οι ποιοτικές σχέσεις γονέων-παιδιών και η θετική προσέγγιση στην άσκηση γονεϊκότητας επηρεάζουν θετικά την ανάπτυξη των παιδιών. Ο κύριος σκοπός της μελέτης είναι η ανάπτυξη και εφαρμογή μιας παρέμβαση θετικής ψυχολογίας που ενισχύει το χτίσιμο θετικών σχέσεων μεταξύ γονέων και παιδιών. Ο ερευνητικός σχεδιασμός περιελάμβανε 3 ομάδες Ελλήνων γονέων με παιδιά 4-14 ετών που συμπλήρωσαν ερωτηματολόγια, πριν και μετά την παρέμβαση, τα οποία μετρούσαν: τη θετική γονεϊκότητα, τα γονεϊκά στυλ σχετιζόμενα με το συναίσθημα και την ψυχική υγεία των γονέων. Η διαδικτυακή παρέμβαση 5 εβδομάδων με τίτλο «Το σπίτι των θετικών σχέσεων» εφαρμόστηκε την ίδια περίοδο στην ομάδα 1 (N = 18) και στην ομάδα 2 (N = 16), ενώ η ομάδα 3 (N = 15) αποτέλεσε την ομάδα ελέγχου χωρίς την εφαρμογή παρέμβασης. Για την ανάλυση των δεδομένων εφαρμόστηκε ανάλυση διακύμανσης επαναλαμβανόμενων μετρήσεων και διερευνήθηκε η αποτελεσματικότητα της παρέμβασης. Τα αποτελέσματα έδειξαν σημαντική αύξηση στην κοινωνική ευημερία των πειραματικών ομάδων, ενώ παράγοντες που συνδέονται με τη θετική γονεϊκότητα, όπως η καλλιέργεια αξιών και η αναγνώριση και ενίσχυση των θετικών στοιχείων, παρουσίασαν ανοδική τάση. Δεν βρέθηκαν διαφορές ανάμεσα στις ομάδες ως προς το στυλ που υιοθετούν οι γονείς για να διαχειριστούν τα συναισθήματα των παιδιών τους, αλλά τα συναισθήματα αμφιβολίας των γονέων στο να διαχειριστούν τα συναισθήματα των παιδιών τους βρέθηκαν μειωμένα στις πειραματικές ομάδες. Οι περιγραφικές αξιολογήσεις των συμμετεχόντων για την παρέμβαση ήταν θετικές. Συνεπώς, η παρέμβαση που σγεδιάστηκε παρουσίασε θετικά αποτελέσματα για τους γονείς, αλλά απαιτείται περαιτέρω έρευνα των παρεμβάσεων ενίσχυσης των θετικών γονικών πρακτικών.

Λέζεις-κλειδιά: παρέμβαση θετικής ψυχολογίας, θετικές σχέσεις, γονείς, παιδιά, θετική γονεϊκότητα

Abstract

Positive relationships and well-being intersect, as the need of connecting well with others is satisfied and both parts can flourish. High quality parents-children relationships and positive approach to parenting affect positively children's healthy development. The main purpose of the study is to develop and apply a positive psychology intervention that enhance positive relationships between parents and children. The research plan included 3 groups of Greek parents with children 4-14 years old, who completed pre and post the intervention questionnaires to measure positive parenting, adopted emotion related parenting styles and mental health of parents. The 5-week online intervention called "The house of positive relationships" was applied in sub-group 1 (N=18) and sub-group 2 (N=16) at one time, while group 3 (N=15) formed a control group of no treatment administrated. Repeated measures analysis of variance was used on data and intervention efficiency was investigated. Results shown a significant increase in social well-being of experimental group, while factors related to positive parenting, as nurturing values and strength identification, presented a slight to moderate increase. No difference in emotion coaching socialization styles was found between groups, but parental feelings of uncertainty/ineffectiveness with helping children deal with emotions were found decreased in the experimental group. Participants' qualitative descriptions of the intervention were also positive. Consequently, the developed intervention presented positive outcomes for parents, but further investigation is necessary in interventional attempts to reinforce positive parenting practices.

Keywords: positive psychology intervention, positive relationships, parents, children, positive parenting

Introduction

Human beings are social animals that relate to others and form relationships in every stage of life (Reis & Gable, 2003). The first and one of the primary relationships in humans' life is with their parents. Parents, who are usually called attachment figures (Bowlby, 1969), are significant others with whom children form a unique and irreplaceable emotional bond (Rohner, Khaleque, & Cournoyer, 2012). The importance of this early attachment in infancy can be explained by the basic human need for love and connection (Baumeister & Leary, 1995). A high-quality parent-child relationship, where parents provide emotional support to their children, is major for child's healthy development (O'Brien & Mosco, 2012).

High quality relationships may be the most important source of well-being (Berscheid & Reis, 1998). Positive relationships are related to well-being, illustrating the need of connecting well. A plethora of studies emphasize the importance of positive relationships (Diener & Seligman, 2002; Helsen, Vollebergh, & Meeus, Keyes, 1998; Ryff, 2000; Smith, Breiding, & Papp, 2012), indicating that positive relationships contribute through support to positive outcomes for health and emotional, psychological, and social well-being of its members.

The parent-child relationship stands as the primary system where children can learn to relate to their parents and form positive relationships. The responsibility of the parental role for the building of positive relationships is related to the behaviors that parents adopt to communicate with their children. Parenting and parenting styles describe the behaviors expressed by parents (Lerner, Rothbaum, Boulos, & Castellino, 2002; Steinberg & Darling, 1993), and serve as a tool to assess the kind of relationships formed between parents and children. Parenting and parenting styles have been developed and studied widely by researchers (Baumrind, 1967; Gottman, 1997; Nelsen, 2006; Sanders 2008) in order to investigate the effectiveness of the parental role. Research interest was firstly oriented to negative family aspects, but gradually has moved to positive family aspects, leading to the development of positive parenting (Preston et al., 2016), which is shown to affect positively child's well-being (DCSF 2009; O'Brien & Mosco, 2012).

The development of positive psychology field (Seligman & Csikszentmihalyi, 2000) enriched positive parenting by including positive psychology constructs, such as positive emotions, character strengths, savoring. Positive psychology drew the attention

to children's well-being by differentiating to previous parenting approaches and focusing on understanding what creates families that flourish (Seligman, 2002).

Positive psychology aims to explore and develop strategies that contribute to the flourishing and optimal functioning of people (Gable & Haidt, 2005). The development of positive psychology interventions includes positive relationships as well. In fact, various interventions in multiple groups, such as families, schools, institutions, have been designed and applied aiming to promote the flourishing of relationships and individuals (DiBlasio & Benda, 2008; Harris, Luskin, Norman, Standard, Bruning, Evans, & Thoresen, 2006). In the field parenting interventions, a large part of its research focuses on group parenting programs that enhance parental functioning both in international (Bloomfield & Kendall, 2012; Nelsen, 2006; Sanders, 2008) and Greek scientific literature (Konstantinidis, 2011). The aim is similar in both English and Greek programs: a) to inform parents, change their attitudes and perceptions, and strengthen the parental role, b) to improve communication and relationship with their children, and c) to cultivate skills, so that parents manage the problematic behaviors of children (Konstantinidis, 2011). Although, the academic community has extensively explored parenting and the interventional parenting programs has been oriented toward positive parenting, little research has been conducted to include a positive psychology parenting overview and very few studies adopt this approach. This is what we are trying to address with the present study, aiming in building positive parenting relationships and improving parent-child well-being through the scope of positive psychology field.

The current study aims at combining the field of positive psychology with essential theories and principles of relationships and parenting models. A model of enhancing positive relationships between parents and children is proposed using positive psychology constructs, such as positive emotions and character strengths. The purposes of the present study are to develop an intervention of positive relationships between parents and children that enhance positive relationships between them and apply the intervention in a sample of Greek parents in Greece.

Literature Review

Positive Psychology

Definition and history. Positive psychology was founded 1998 by Martin Seligman (president of the American Psychological Association at this period) as a distinct field of psychology science, aiming to "study the conditions and processes that contribute to the flourishing or optimal functioning of people, groups, and institutions" (Gable & Haidt, 2005, p. 103).

This rapidly growing movement came to counterbalance the problem centered approach of psychology science. Even though the constitution of the World Health Organization (2002) defines (since 1946) that health "is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity", for the past half century psychology research had focused on pathology (Gable & Haidt, 2005; Sheldon & King, 2001). Gable and Haidt (2005) reported three reasons for: (1) the need to first compassionate/(assess and cure) those who suffered instead of those who were mentally healthy; (2) the historical situation created after the World War II that prioritized care of mental illness (e.g. veterans); (3) the forceful impact the negative aspect had on psychological theories. This fact helped patients with mental complaints or disorders (Mitskidou & Stalikas, 2011), but neglected the how and what makes life worth living (Seligman & Csikszentmihalyi, 2000).

Positive psychology redirected the focus on the average person and its strengths and virtues (Sheldon & King, 2001). Fausto Massimini and Antonella Delle Fave (2000) inferred that living systems are self-organizing and oriented toward increasing complexity; this reveals, according to Seligman and Csikszentmihalyi (2000), the individual's immanent need to reproduce optimal experiences, going a step beyond the individual's immanent need to survive and adapt to his environment. The study of Keyes (2002) confirmed that most individuals are mentally healthy, but they are not happy. Thus, positive psychology, consistent with the demands of its time, came to search ways to bring people to a better point, not only from a negative scale to zero point, but to uplift them to positive – to teach the how of happiness.

Flourishing. The last decade the scientific society has shown an increased interest for the concept of flourishing (Diener et al., 2010; Huppert & So 2013; Seligman, 2011), which has been reported as an ultimate state in psychology

(Schotanus-Dijkstra et al, 2016) and a goal standard for positive psychology (Seligman, 2011). Flourishing is a notion introduced by the researchers Keyes (2002) and Fredrickson (2009). Keyes (2002) recognized flourishing as a diagnosis of the presence of mental health, contrary to the absence of mental health – languishing –, while Fredrickson (2009) saw flourishing as a state of positive mental health she defined: "to flourish is living within an optimal range of human functioning, one that connotes goodness, generativity, growth, and resilience" (Fredrickson & Losada, 2005, p. 678).

This construct refers to the experience of feeling well and functioning well (Keyes, 2002), describing a state where both hedonic and eudaimonic behavior contributes to individual growth. The combination of emotional well-being, psychological wellbeing and social well-being derives from the two leading traditions of well-being, hedonism, and eudaimonism (Huppert & So, 2013; Keyes, 2002; Ryan & Deci, 2001; Ryan & Deci, 2008). The hedonic approach refers to the subjective or emotional wellbeing research (Diener et al., 1999; Ryan & Deci, 2001) and consists of happiness, life-satisfaction and a positive-negative affect balance (Diener 1984), while the eudaimonic approach relates to psychological well-being and social well-being, emerging from various aspects of prosperity, such as engagement, positive relations, meaning, purpose in life, self-realization, environmental mastery (Keyes, 2002; Ryan et al., 2008; Ryff, 2014).

Hedonistic and eudaimonic aspects of well-being research were presented as competing alternative models of psychological functioning, but in recent years the research has focused on how emotional well-being, psychological wellbeing and social well-being complement or relate to one another and how they can be integrated into a structure of flourishing mental health. Keyes (2002) operationalized positive mental health, or flourishing, as a result of emotional, psychological and social well-being synthesis. While hedonic well-being and eudaimonic well-being relate to an optimal range of human functioning (Ryan & Deci, 2008), both constructs are distinct in the scientific literature (Kyriazos, Stalikas, Prassa, &Yotsidi, 2018). Keyes (2005) remained close to the definition of the World Health Organization (2002) that mental health and mental illness should be conceptualized as separate, but also correlated unipolar dimensions, and proposed a dimensional mental health state: the mental illness continuum and the mental health continuum. Thus, flourishing refers to the mental health continuum and the individual's endeavors to thrive and prosper.

The idea that flourishing is a descriptor and measure of positive mental health and overall life well-being has been welcoming by the research community. Growing research evidence supports the incorporation of this new conceptual framework and the use of multi-dimensional measures of well-being (Huppert, 2013; Kobau et al., 2011; Schotanus-Dijkstra et al., 2016).

Development and basic concepts. Positive psychology has encompassed research and practice to variables associated with well-being. Well-being moved to the center stage, indicating both its promises and challenges. Positive psychology shifted the paradigm a) by emphasizing on positive aspects and a well-lived and meaningful life (Seligman, 2002), and b) by suggesting interventions from an individual and institutional scope (that include people, families and communities) (Lopez & Snyder, 2011). But, the field received critique which highlighted three issues: (1) the dominance of positivity that prioritizes positive phenomena and excludes negative ones (Lomas & Ivtzan, 2016); (2) methodological problems (Hackman, 2009; Miller, 2008; Schneider, 2011; Wong & Roy, 2017); and (3) the Western elitism and focus only on individualist culture. (Christopher & Hickinbottom, 2008; Wong & Roy, 2017).

Over years positive psychology – opened to the scientific dialogue – continued to follow the positive paradigm and incorporated new elements and constructs, refuting many concerns. The systematic review of Kim, Doiron, Warren and Donaldson (2018) indicated a growing balance of positive and negative variables and an inclusion of different cultural and social perspectives: serving as a response to critics.

This rebuttal phase, also, resulted the emergence of a second wave of positive psychology which proposed a more balanced approach of positive and negative notions. Lomas and Ivtzan (2016) described that positive psychology separates positive and negative qualities, excluding the dark aspects of human existence and the meaning (in life) that may derive from suffering (Vohs, Aaker, & Catapano, 2019). The second wave recognized the dialectical nature of well-being that depends on the dynamic interaction between negatives and positives experiences, behaviors and emotions (Lomas & Ivtzan, 2016). Thus, the embracement of positive and negatives aspects of life can optimize positive outcomes in multiple situations and different cultural environments (Frawley, 2015; Ivtzan, Lomas, Hefferon & Worth, 2016; Wong, 2019).

Positive psychology, this newly formed field, for the last 2 decades has been developing to promote a holistic approach to well-being. Well-being constitute a fundamental concept of the field both in theory and in practice. Below we present four

basic concepts, which stand out for their contribution to well-being and serve the purposes of this document thesis. These are: positive emotions, character strengths and savoring.

Positive emotions. Definitions of emotions differ within the scientific community (Izard, 2010); but, an emerging scientific consensus defines emotions (positive and negative) as multicomponent response tendencies that can involve cognitive appraisals, physiological responses, facial expressions, and the experience of subjective feelings, among other changes, over a relatively short time span (Fredrickson & Cohn, 2008).

Theories about the form and function of emotions vary in the literature, mainly concerning how positive and negative aspects of emotion relate (Kratz, Davis, Zautra, & Tennen, 2009). Bradburn (1969) was the first to indicate that individual's positive and negative emotional experiences are independent, starting a cascade of studies that support the bi-dimensional model of emotion (Arthaud-Day Rode, Mooney & Near, 2005; Diener & Emmons, 1985).

Barbara Fredrickson (1998, 2001) was the first to develop a theorical model for positive emotions. Despite the different function of positive and negative states, traditional models failed to capture the unique effects of the positive aspects. Fredrickson (2004) denoted three reasons: (1) positive emotions were neglected relative to negative emotions; (2) positive emotions confused with related affective states; and (3) positive emotions were described in terms of generic tendencies to approach or continue. Thus, the researcher developed the broaden and build model, which outlines how positive emotions broaden an individual's momentary thought-action repertoire and build their enduring personal resources (Fredrickson, 2009).

Fredrickson (1998, 2001) recognizes both negative and positive emotions as a result of natural selection in human evolution. Positive emotions like love, amusement, gratitude broaden awareness and promote creative thoughts and actions. Over time, their broadening effect builds personal physical, intellectual, social and psychological resources and triggers complex dynamics – through upward spirals – towards psychological growth and improved well-being. In contrast, negative emotions like anxiety, fear, anger, comprise the thought and promote narrow, immediate survival-oriented action repertoires on the imposing threat (real or imagined), restricting the ability to openness of mind. The Broaden-and-Build theory emphasizes the essential role of positive emotions by revealing that: (1) positive emotions produce optimal

functioning, not just within the present, but over the long-term, coping and countervailing the narrowing action of negative emotions; (2) the experience of positive emotions is a mean to flourishing; (3) positive emotions can contribute to a better understanding of emotions in general (Fredrickson & Losada, 2005; Fredrickson, 2004).

Just as water lilies retract when sunlight fades, so do our minds when positivity fades (Fredrickson 2009, p. 55); that is the metaphor Fredrickson evoked to illustrate her theory on positivity, introduced a few years later as an expansion of the Broadenand-Build theory. Positivity refers to frequent experience of positive emotions. This physical, cognitive and emotional state works as a counterforce to negativity. The aim is to define how positivity can improve people's lives, because eliminating negative emotions does not automatically lead to experiencing positive ones. Fredrickson's and Losada's (2005) research showed a mean ratio of positive to negative affect that indicates a threshold to flourishing and eventually initiates the scientific dialogue on how positivity can improve people's lives to achieve optimal levels of well-being (Fredrickson 2009). Positivity ratio was questioned for its validity from a conceptual and mathematical scope (Brown, Sokal, & Friedman, 2013). Responding via an article, Fredrickson (2013) supported the evidence of mathematical value, but she agreed that more study is necessary to the seeking of positivity ratio. Despite the controversies, positivity is both a way of life and a choice that requires conscious effort and time to establish itself, while it is extremely fragile, because strong negative emotions can overturn it (Fredrickson & Losada, 2005).

The Broaden-and-Built theory of positive emotions had great impact on the science of happiness or people's overall well-being in the past two decades. Many studies highlighted the beneficial effects of positive emotions in cognitive, social, and biological processes (Lopez, Pedrotti, & Snyder, 2018). Positive emotions were associated to: (1) increased longevity (Danner, Snowdon, & Friesen, 2001); (2) positive outcomes of coping stress (Folkman & Moskowitz, 2000); (3) physical health (Kok, Coffey, Cohn, Catalino, Vacharkulksemsuk, Algoe et al., 2013); (4) improved immune function (Cohen, Doyle, & Turner, 2003; Cohen & Pressman, 2006); (5) protection or less pain in chronic disease (Ostir, Markides, Peek, & Goodwin, 2001); and (6) therapeutic change (Fitzpatrick & Stalikas, 2008).

The encouraging findings on the effects of experiencing positive emotions mobilized research in theoretical and interventional study. In theoretical framework,

Seligman (2011) revised the theory of authentic happiness (2002) and created a broader theoretical model of well-being – PERMA – that include positive emotions as one of the basic components. Other researchers designed and applied interventions to increase the positive emotions in individuals or groups (Emmons & McCullough,2003; Lyubomirsky, 2006) in different contexts, as work, education, health, counseling and psychotherapy.

Character strengths. From the fledgling period of positive psychology Seligman and Csikszentmihalyi (2000) pointed the interest in positive individual traits to improve the quality of life. Peterson and Park (2004) tried to answer the question of what good character is, and how can be assessed; they resulted to one project – the VIA (Values in Action) Classification of Strengths. This project aimed to counterbalance the Diagnostic and Statistical Manual (DSM) of the American Psychiatric Association (APA), by focusing on the positive aspects of persons – called character strengths – that can make the good life possible (Peterson & Seligman, 2004).

The researchers described the components of good character based on two levels of abstraction: virtues and characters. Virtues, classified in six categories – wisdom, courage, humanity, justice, temperance, and transcendence – are the core characteristics valued by moral philosophers and religious thinkers (Park, 2009). These six categories are conceptualized as universal predispositions toward moral excellence, due to their importance for the survival of species (Peterson & Seligman, 2004). Character strengths – devised in 24 positive traits – are psychological ingredients — processes or mechanisms — that define the virtues and exist in degrees.

The VIA Inventory of Strengths (VIA-IS) self-report questionnaire (and its various versions) resulted the VIA Classification to measure the degree of the 24 strengths in individuals, and consequently to evaluate interventions targeting the good life, as most individuals have signature strengths (Peterson & Seligman, 2004) that use to accomplish the good life (Seligman, 2002).

Research data demonstrated that positive traits are associated to well-being (Weber & Ruch, 2012), life satisfaction (Niemiec, 2013), and meaning of life. (Peterson, Ruch, Beermann, Park, & Seligman, 2007). Thus, the interest of researchers has focused on ways to enhance the character strengths, by developing interventions to cultivate them (Proyer, Ruch, & Buschor, 2013), or by incorporating them in the therapeutic process (Conoley, Plumb, Hawley, Spaventa-Vancil, & Hernández, 2015; Rashid, 2015). Studies conducted to assess the implementation of strengths have

concluded that strength-based interventions: (1) increase the well-being levels, happiness and life satisfaction (Proyer et al., 2013); (2) reduce the depressive symptoms (Senf & Liau, 2013).

Savoring. The study of savoring as a concept has been developed within the positive psychology field. The term was first used by Bryant (1989) and was studied thoroughly the past two decades. A model created by Bryant and Veroff (2007) defines savoring as the capacity to attend to, appreciate, and enhance the positive aspects of life.

Savoring serves as the positive counterpart to coping (Bryant & Veroff, 2007). Both savoring and coping processes are included in the field of emotion regulation, which investigates the individual's attempt to perceive: (1) what emotions he experiences; (2) when he experiences them; and (3) how he expresses them (Gross, 1998). Both try to explore the mechanisms that reduce or strengthen positive and negative emotions (Gross & John, 2003). The difference lies in the quality of experience: coping moderates the negative feelings, while savoring moderates the positive feelings.

Bryant and Veroff (2007) described that savoring also includes mindfulness and conscious attention to the experience of pleasure. Savoring involves cognitive and behavioral functioning that regulate positive feelings. These processes transform a positive stimulus or event into positive emotions; then the individual focuses its attention on positive emotions and appreciates them. This process of savoring generates the maintenance or enhancement of positive affect by attending to positive experiences from the past, present, or future (Bryant & Veroff, 2007).

The researchers, in their attempt to capture the nature of savoring, distinguished four interrelated conceptual components: savoring experiences, savoring processes, savoring strategies, and savoring beliefs (Bryant, Chadwick, & Kluwe, 2011; Bryant, Ericksen, & DeHoek, 2009; Bryant & Veroff, 2007). At the broadest conceptual level, a savoring experience consists of one's sensations, perceptions, thoughts, behaviors, and feelings when mindfully attending to and appreciating a positive stimulus. At an intermediate level, a savoring process is a sequence of mental or physical operations that unfolds over time and transforms a positive stimulus into positive feelings to which a person attends and savors. At the narrowest level, a savoring response or strategy is the operational component of the savoring process — that is a specific concrete thought

or behavior that amplifies or dampens the intensity, or prolongs or shortens the duration, of positive feelings.

Concerning the savoring response, Bryant and Veroff (2007) identified ten strategies that people use in relation to positive experience: sharing with others, memory building, self- congratulation, sensory-perceptual sharpening, comparing, absorption, behavioral expression, temporal awareness, counting blessings, and kill-joy thinking.

The existing literature studies emphasize that different savoring strategies affect differently the experience of positives emotions (Hurley & Kwon, 2012). As positive emotions can serve as a key element in human flourishing (Fredrikcson, 2009), the fact that many savoring strategies result variously in the well-being of individuals, highlights the need for individuals to adopt a variety of strategies. The scientific research shows that the more savoring strategies individuals use in their daily lives, the higher levels of positivity they experience (Quoidbach et al., 2010; Smith & Bryant, 2017).

Savoring is an important mechanism through which people derive happiness from daily positive events. Specific strategies are associated with indicators of well-being (Jose, Lim, Bryant, 2012), simultaneously the savoring mobilization is positively correlated with overall well-being, supporting that savoring combines both the hedonistic and the eudemonic aspects of happiness (Bryant & Veroff, 2007).

A particular area where savoring can be applied and promote well-being extends to the individual's social relationships. The savoring of relationships enhances a sense of unity and belonging, creating a special bond among its members – which reflects an object of savoring (Bryant & Veroff, 2017). In fact, Wilson, Weiss and Shook's research (2020) showed that savoring was positively associated with perceived social support, which consequently was associated with better psychological well-being.

As relationships are an area where savoring is focused on (Bryant, Smart, & King, 2005), relational savoring is referred to savoring experience that evokes emotions through a close emotional connection with another person (Borelli et al., 2014). Relied on attachment theory and the Broaden-and-Build theory of positive emotions, relational savoring and its techniques try to strengthen relationships and promote flourishing by enriching memories of protection, acceptance, support, or adoration within a relationship (Borelli et al., 2020). Borelli and colleagues' (2020) study that aimed to increase depths of relational savoring into the narrative of mothers with young children

presented positive outcomes, thus supporting the enrichment of the parent-child relationship.

Research topics. Positive psychology research was primarily concerned to positive emotions, strengths and virtues. Through the development of the field the scientific interest has been expanded including basic concepts and emerging components, such as flow, hope, mindfulness, savoring, and self-compassion. Research topics are linked to positive experiences, quality of life, creativity, happiness and wellbeing, in multiple environments and various contexts.

One of the main topics of positive psychology research is positive relationships. From the beginning of the field, Seligman (2002) described that happiness could be analyzed into three different elements: a) positive emotions, b) engagement, and c) meaning. The theory of Authentic Happiness included interpersonal relationships, thus highlighting that well-being depends not only on individual aspects, but also on issues related to context and relationships. The PERMA model of well-being (Seligman, 2011) – resulted as a revision of the theory of authentic happiness – also included positive relationships. In fact, Seligman (2011) described that people are motivated to look for and to maintain positive relationships, even when they have not developed any of the other well-being element. Recent research continues to view positive relationships as a main topic, aiming to investigate its multiple aspects.

Positive relationships

Defining positive relationships. Human beings are social animals; they need each other for two main reasons: a) to survive and b) to flourish. Roffrey (2012) describes three needs of the human nature: (1) humans need a sense of belonging; (2) humans want to be connected with others; (3) humans seek relationships that nurture their mind, body and spirit.

Berscheid and Reis (1998) considered that relationships may be the most important source of life satisfaction and wellbeing. Relationships are threaded through every stage of life, from the importance of early attachment in infancy, through learning to make friends as children, belonging to teenage groups, onto romantic, sexual relationships and becoming parents and workers (Reis & Gable, 2003). The how of connecting well with others affect a wide spectrum of different relationships in humans' lives, at different environments and situations (e.g. at home, at work, at school and at play).

In the question "What is a positive relationship?" there is a consensus among researchers that positive relationships are related to well-being. The theories of well-being and its components place positive relationships in the core of the concept (Hone et al., 2014), illustrating the need of connecting well and the need to know how to connect well with others.

While the question remains, there are multiple answers, as theoretical frameworks construe positive relationships in many ways. Reis & Gable (2003) reviewed that positive relationships are construed: (1) as an intrinsic component of psychological well-being, not just as a cause of it; (2) as close relationships like marriage and parenting; (3) as intimacy or secure attachment; (4) as broader constructions like by friendships and social networks (Reis & Gable, 2003).

Despite the heterogony of the term among theorists, positive processes in relationships are understood as functionally independent to negative processes. Reis and Gable (2003) argued that positive and negative relationship processes are independent; they proposed a conceptualization of positive relationship processes not as the opposite of negatives but rather as the result of a functionally independent system. In parallel to positive and negative emotions — mentioned earlier — the researchers considered that it would be more fruitful to investigate the processes implicated independently.

Positive relationships and well-being. As positive relationships constitute a basic component in well-being, there is an abundance of theories (e.g. Keyes, 1998; Ryff, 1995) and key studies (e.g. Diener & Seligman, 2002; Helsen, Vollebergh, & Meeus, 2000; Smith, Breiding, & Papp, 2012) on relationships and well-being. Seligman (2011) noted that people are motivated to seek and maintain positive relationships, even when they have not developed any of the others well-being elements. Campbell, Converse and Rodgers (1976) found that marriage and family life were the best predictors of overall life satisfaction among the major domains of human activity. Studies of relationships conducted have concluded that the benefits of relationships, also, include psychical health, indicating that social connections and social support play a role to recovery from illness and physiological functioning (Burgoyne & Renwick, 2004; Caron & Liu, 2011; Krause, 2002).

The results of the Harvard study for Happiness, proved that supportive relationships can predict physiological and psychological well-being levels higher than any other variable (Vaillant, 2012; Waldinger, 2015). One of the main conclusions of

the longest lasting study in the history of the science was that warmth, as a characteristic of relationships that someone has throughout his life, has the greatest influence on the sense of satisfaction in life. Waldinger's (2015) words are declarative: "Good relationships keep us happier and healthier. Period. [...] The good life is built with good relationships."

Another extended study of Fowler and Christakis (2008) confirmed that social relationships influence every sector of human function such as professional and family status, physical and mental health and people's subjective happiness. The researchers pointed out that we are all connected beyond the limits of our acquaintances since a positive relationship in a person's life not only has an impact on him, but also has an impact on his friends and the friends of his friends.

In conclusion, positive relationships contribute through warmth and support to beneficial effects for health and emotional, psychological, and social well-being of individuals.

Building positive relationships and their characteristics. The need to foster positive relationships displays the need to know how to connect well with others. John Gottman (1995, 1999, 2007) is a researcher who has devoted his work to the deeper understanding of positive close relationships by developing a series of theories around *The Sound Relationship House*. Gottman first started to study sequences of marital interaction; he focused mainly on the characteristics and functions that make a couple's life to flourish. Later the findings of his studies focused on the key components that make any relationship successful. His research evidence was applied to relationships, from couples to parents and professionals. Below are the principles of positive relationships based on Gottman's research: build love maps, share fondness and admiration, turn towards instead of away, the positive perspective, manage conflict, make life dreams come true and create shared meaning (Gottman & Silver, 1999).

Build love maps: The first element of a positive relationships is the "love maps" the members of the relationship build. These maps are about how well each person knows the other person's experiences, the things they like or dislike, their personality traits and their talents (Gottman, 1999; Gottman & Silver,1999). Love maps concern the ability of each member to recognize and show sensitivity in the other's inner world. As relationships become long-term, love maps are neglected, as it is taken for granted that individuals know each other well. However, members of positive relationships

show a constant and vivid interest in the other person's daily life, devoting time to them and creating positive connections (Gottman, 1999).

Shared fondness and admiration: Fondness and admiration are two of the most crucial elements in a rewarding and long-lasting relationship (Gottman & Silver, 1999). There are different ways for people to admire their significant others. Many times, people focus on the negative aspects of the people around them, thus constructing a relationship with negative connotation. The fondness and admiration that individuals can create can affect positively their relationship.

Peterson and Seligman (2004) through the categorization of character strengths and virtues suggested a useful tool so that individuals can recognize their own strengths and the strengths of their love ones. People, focusing on the good of others, construct a positive image of the other person. That makes them more satisfied with the relationship and helps the relationship to flourish (Fincham, Rogge, & Beach, 2018).

Turn towards instead of away: Turning toward means connecting with the other member of the relationship; being present and responding favorably to other's bids for attention, affection, humor or support. Turning towards is the basis of emotional connection (Gottman & Silver, 1999).

This principle highlights the importance of giving positive feedback on the positive characteristics of the other relationship member. The process of expressing each other's positives has a variety of benefits for both the relationship and the individual: (1) the positive connection created enhance emotional expression, which is associated with levels of relationship satisfaction (Zhao & Epley, 2019); (2) the focus on strengths reinforces self-esteem and helps the individual to build a stable and positive self-image (Schimel, Arndt, Pyszczynski, & Greenberg, 2001).

The positive perspective: The first three principles build the fourth story of *The Sound Relationship House*: the positive perspective that determines if the positive sentiment can be maintained in the relationship. Gottman (1999) stated that a basic principle of the positive perspective is to accept influence from the other member of the relationship by taking its opinions and feelings into account, thus searching for common ground.

Manage conflict: Positive relationships manage to survive long-term and flourish when they use sound and flexible strategies to manage conflicts (Gottman, 2007). Positive relationships stand out for their ability to alter the negative climate created by a disagreement. Gottman (2007) supported the use of humor and the

maintenance of a positive attitude through a smile or an apology. Research studies confirmed that attitudes of forgiveness play a role in thriving relationships (Lopez, Pedrotti, & Snyder, 2018). Especially, at the family level, individuals who forgive their family members more easily (whether they are parents or children) have higher levels of emotional expression and maintain good quality relationships (Maio, Thomas, Fincham, & Carnelley, 2008).

Make life dreams come true: The sixth element refers to the connection of reality and desire. Disagreement about similar issues are reappeared constantly into relationships. The goal is not to solve the problem, but to move from gridlock to dialogue (Gottman & Silver, 1999). Dialogue can help both members to realize their dreams and find a solid base to compose their inspirations.

Create shared meaning: The seventh principle of positive relationships refers to the creation of shared meaning using rituals, roles, goals, and symbols (Gottman & Silver, 1999). The creation of common goals and the effort to achieve them result to the flourishing of relationships (Gottman, 2007).

Bryant and Veroff (2007) have emphasized the importance of savoring and have suggested savoring strategies that are related to well-being. The adoption of these strategies has been proved beneficial to relationships, promoting the experience of positive emotions of the members.

Positive relationships within the family. People typically begin forming relational bonds in infancy within the family (Hendrick & Hendrick, 2009). The family role is a key framework for the development of its members (Benson, Scales, Hamilton & Sesma, 2006; Collins, Maccoby, Steinberg, Hetherington, & Bornstein, 2000). Combined with the biological, cognitive and emotional factors, the family can promote, or undermine, the child development (Antoniadou-Koumatou, Panagiotopoulos, Attilakos & Prasouli, 2015), and its behavior (Preston et al., 2016).

The family satisfies multiple needs, from food and shelter to psychological care (Tantaros, 2011). As the biological needs are been satisfied, love is referred to be one of the basic human needs for connection (Baumeister & Leary, 1995). The need to belong requires that people form *lasting, positive, and significant personal relationships* (Baumeister & Leary, 1995, p. 497). The family is the framework to develop such relationships. Attachment theory describes how children and their parents develop these bonds during early months and years (Bowlby, 1969). Thus, the family

stands as the first and primary system where children can communicate, relate to their parents and form positive relationships.

The kind of relationships formed among the members of a family influences the well-being of the family and its members. Studies have shown that strong and stable relationships in the family affect positively child's well-being (DCSF 2009). Growing up in environments that cultivate positive relationship characteristics, help children to become more resilient to difficulties and are less likely to develop drug abuse or engage in incidents of violence and school bullying (Hromek & Walsh, 2012).

Within the family parents set the tone of relationships, as they are responsible for the children. The responsibility of the parental role for the building of positive relationships is discussed in the next chapter.

Parenting

Definition of terms used. Parents are significant others with whom children form a long-lasting, unique and irreplaceable emotional tie (Rohner, Khaleque, & Cournoyer, 2012). They are usually called attachment figures (Bowlby, 1969), since the degree of emotional support they provide to their children defines the quality of the relationship with their children.

Family viewed from a systems orientation is as a number of people in interaction by a similar proposition (Conoley & Conoley, 2009). The ability of the family system to operate defines the family functioning. Family functioning in a cohesive and flexible manner results to positive outcomes for the members and the family interactions (Eagle & Dowd-Eagle, 2009). Especially, a high-quality parent-child relationship is critical for healthy development of the child (O'Brien & Mosco, 2012).

Eagle and Dowd-Eagle (2009) described the dimensions of family functioning: family cohesion, family involvement, family adaptability/flexibility, parenting styles and problem-solving processes, shared beliefs and values. It is critical for the study to report to the dimensions of parenting and parenting styles.

Parenting involves behaviors across life, among conspecifics organisms of different generations (Lerner, Rothbaum, Boulos, & Castellino, 2002). Evolved through time and eras into the social framework, parenting is a complex process which includes a variety of parenting behaviors and practices. Despite the cultural influences, parenting has three major goals: (1) ensuring children's health and safety; (2) preparing

children for life as productive adults; and (3) transmitting cultural values (American Psychological Association APA, 2000).

The behaviors expressed by parents define their parenting style. Parenting style subsumes three major elements: (1) the emotional relationship between the parent and child; (2) a set of beliefs and attitudes that parents adopt when exercising their parental role; and (3) a set of concrete practices that parents follow in their daily communication with their children (Steinberg & Darling, 1993). The adopted parenting style serve as a model for the family's ability to communicate and as a tool to assess the kind of relationships formed between parents and children.

Parenting typologies: the emotion-related parenting styles. Viewed as parents' stable characteristics, parenting styles are usually discussed as typologies. Typologies of parenting styles is a broader concept that have been developed and studied extensively by researchers.

Baumrind (1967, 1991) classic research identified four types of parenting styles: (1) authoritative, (2) authoritarian, (3) permissive and (4) uninvolved, which was added later (Maccoby & Martin, 1983). Authoritarian parents are very rigid and strict by applying high levels of authority and control, with limited negotiation regarding standards of behavior. Authoritative parents adopt an optimal parenting style for healthy family functioning, characterized by a balance between freedom and responsibility. Permissive parents value highly children's freedom and autonomy, allowing them to regulate their own activities. Uninvolved parents are often emotionally or physically absent; this style is marked by the absence of engagement with little expectations and limited communication (Baumrind, 1967; Eagle & Dowd-Eagle, 2009; O'Brien & Mosco, 2012).

Gottman (1997) moved from the classic typology of Baumrind and turned his attention to the relationship between parents and children by highlighting the significant role of emotion involved in parenting. The awareness of the emotion role plays a basic role in life and particularly in family relationships. For parents, emotional awareness and emotional intelligence – ability to handle one's own and other people's emotions – play a role to the way parents can guide their emotion socialization practices and, thus can guide their children and teach them about emotion, emotion regulation and social skills (Paterson et al., 2012). These emotion regulation skills can be predictors of children's social competence (Diener & Kim, 2004).

Gottman, Katz and Hooven (1997) used the term meta-emotion to describe parents' reactions attitudes toward emotion. Parents' meta-emotion philosophy, proposed by the researchers, includes their thoughts and feelings about their own emotions and the emotions of their children. This influences their emotion socialization efforts and the coaching of the emotion in their children.

The results of their study identified four types of parents and the effects of this emotion-related parenting style on their children: emotion coaching, laissez-faire, dismissing, and disapproving. Parents, who adopt an emotion coaching socialization style, value their children's expressions of emotions by using these emotional moments to a) offer guidance on regulating emotions, b) set limits and teach acceptable expression of emotions, and c) teach problem-solving skills. Laissez-faire parents accept their children's emotions, but they offer little guidance on behavior. In contrast, dismissing and disapproving parents reject children's emotions. Parents with a dismissing style disengage from or ignore, or trivialize their children's emotions, and parents with disapproving style criticize, reprimand, or punish their children's emotional expression. Therefore, two broad categories were formed: parents who give their children guidance about the world of emotion and parents who do not.

Parents who get involved with their children's emotions are referred as emotion coaches. Parents who adopt emotion coaching parenting style seem to help their children develop stronger emotion regulation and social skills (Gottman et al., 1997). Research findings indicate that mothers' acceptance of children's negative emotions is associated with child's limited aggression through the child's emotion regulation (Ramsden & Hubbard, 2002). Also, children of emotion coach type parents showed strong emotion-coaching skills, fewer behavior problems and higher academic achievement (Hooven, Gottman, & Katz, 1995).

Development of Positive Parenting. The development and inclusion of positive parenting ethics to facets of child development and well-being were gradual. During early stages of the psychology science studies interested in family happiness (Hollingworth, Terman & Kelly, 1939) and the effectiveness of the parental role (Watson, 1928, as mentioned in Galanakis, Mertika & Sergianni, 2011). Over time psychological research oriented to negative family aspects (Preston et al., 2016), focusing on the factors related to the causes and expressions of the child's maladaptive behavior (Sroufe & Rutter, 1986). Recently, research interest has expanded to include family factors associated with healthy psychosocial adjustment and child well-being

(Preston et al., 2016). The growing interest in positive parenting is also reflected in the Recommendation 19 of the Committee of Ministers of the Council of Europe entitled "Policies in support of positive parenting" (2006) and the children's rights report of the United Nations (UNF, 2006).

Positive parenting has developed based on the basic needs of children, which include: (1) the need for love and security; (2) the need for new experiences and play; (3) the need for praise and recognition; (4) the need to take responsibility (Pringle, 1986). Following these needs, Kyriazos and Stalikas (2018) distinguished two of the most influencing theoretical frameworks that illustrate the parenting shift toward positivity: a) Positive Discipline (Nelsen, 1979, 2006; Durrant, 2011), and b) Positive parenting (Sanders, 2008).

Positive Discipline (Nelsen, 1979, 2006) encompasses the work of Baumrind (1967) on parenting styles by proposing a parental and classroom management method that promotes positive reinforcement and positive behaviors and excludes physical punishment. Durrant (2011) introduced a positive discipline model that reduces violent parent-child interactions by teaching a set of principles to children with behavioral problems. Both approaches promote a non-authoritarian control practice (Nelsen, 1979, 2006), or the avoidance of parent violence (Durrant, 2011).

Sanders (2008) described the principles of positive parenting: safe and engaging environment, positive learning environment, assertive discipline, realistic expectations of the parents and parental self-care. This positive parenting program – called Triple P-Positive Parenting program – aims to prevent and treatment emotional and developmental behavioral problems (Sanders, 2012), based on the perspective of strengthening parenting and family relationships and reducing child maltreatment (Pickering & Sanders, 2016).

Positive Psychology and Positive Parenting. The development of the positive psychology field (Seligman & Csikszentmihalyi, 2000) and the broaden and build theory for the role of positive emotions (Fredrickson,1998; 2001) led to: (1) a shift of interest toward positive parenting; and (2) a change in goal setting. According to Kyriazos and Stalikas (2018) there was a transition from the positive psychology movement overview to the positive psychology parenting overview. The first refers to the positive discipline models (Nelsen, 1979, 2006; Durrant, 2011) and the positive parenting program (Sanders, 2008) mentioned above. The second includes the principles of positive psychology: it elaborates positive emotions and character

strengths of family members, promoting well-being (Seligman, 2002). Thus, the previous approaches adopt specific parental strategies to deal with every stressful factor that arises in the family, while positive psychology parenting recognizes that individuals can flourish through adaptation to the changing life environment (Holte et al., 2014).

Parenting was included in the interests of positive psychology from the beginning. Seligman and Csikszentmihalyi (2000) were interested in families and they initialized the scientific dialogue on understanding what creates families that flourish. positive psychology drew the attention to children's well-being as a conceptualization that intends the positive aspects and does not just try to avoid the psychological maladjustment and childhood disorders (Kyriazos & Stalikas, 2018). Seligman (2002, p. 11) stated: "there is a need for a better psychology for all normally adjusted children that equally studies positive emotions as distressing ones, at work, marriage, and parenting and will help children use their strengths every day in all life domains".

Following these developments, the growing positive psychological research, which is based on emerging theories that are complementary to traditional approaches, seems to be able to enrich and expand existing parenting models and enhance research practice with new interventions.

Positive Interventions

Definition of psychoeducational groups. Psychoeducational groups combine psychology components and education components as the etymology indicates. Psychoeducational group focuses on education of members about a psychological topic, emphasizing on cognition first and feelings or actions second. The educational part refers to their structure and the theory elements contained in the form of mini lectures. The psychological part refers to the engagement of the members and the experiential learning style. These groups contain: a) the knowledge, and b) the experience, components that distinguish them from the educational groups and the therapy groups (Brown, 2004).

The Association for Specialists in Group Work (ASGW, 2000) emphasized the educational and prevention goals in such groups. The goals of the groups may include the accomplishment of a task, education in specific strategies or skills, personal development, problem solving, or remediation of mental and emotional disorders. Such

groups consist of children, adolescents, or adults in many environments and institutions, from hospitals and schools to businesses and military (Brown, 2004).

Psychoeducational groups have some characteristics. The groups size ranges from 5 to 50 or even 100 members. Their length and duration may vary, but they are usually characterized by the brevity of their sessions. The sessions are usually limited and specific.

Positive Psychology Interventions. One of the main purposes of positive psychology is to explore and develop strategies, through which optimal human functioning can be cultivated. To facilitate its purpose, a large part of its research focuses on empirically interventions (Magyar-Moe, 2009). Since the foundation of positive psychology (Seligman & Csikszentmihalyi, 2000), there was an emergence of researches that included interventions with psychoeducational elements on concepts of positive psychology.

In these studies, the researchers asked the participants to perform one or more activities for a certain period of time; after the completion of the intervention they used scales to measure specific variables and check the effectiveness of the positive psychology intervention. For example, Seligman, Steen, Park and Peterson (2005) tested 5 purported happiness interventions and found that the exercises of a) gratitude visit, b) three good things, and c) using signature strengths in a new way increased happiness and decreased depressive symptoms of participants. Sheldon and Lyubomirsky (2006) studied university students for four weeks trying to predict positive emotions through expressing gratitude and visualizing best possible selves. Their findings supported that undergraduate who performed the exercises presented beneficial effects or raising and maintaining positive mood.

Sin and Lyubomirsky (2009) reported that the aim of the positive psychology interventions is to cultivate positive feelings and positive behaviors and eventually enhance well-being. In scientific literature we can found interventions aiming to promote well-being (Abbe, Tkach, & Lyubomirsky, 2003; Seligman, Steen, Park, Peterson, 2005; Sheldon, & Lyubomirsky, 2006) and positive emotions (Emmons & Mc Cullough, 2003; Otaka, Shimai, Tanaka-Matsumi, Otsu, Frederickson, 2006) of individuals, as well as we can found intervention programs conducted in a groups (Seligman, Rashid & Parks, 2006). The positive outcomes for the participants served as

a catalyst for the growing interest in positive psychology interventions (Layous et al., 2011; Layous & Lyubomirsky, 2012).

This rapidly growing field of positive psychology led to the development of positive psychology interventions that encompass more positive psychology concepts, including positive relationships. A variety of interventions in families, at school, at work and in counseling have been designed and applied aiming to promote the flourishing of relationships and individuals (DiBlasio & Benda, 2008; Harris, Luskin, Norman, Standard, Bruning, Evans, & Thoresen, 2006).

Online Positive Psychology Interventions. The accessibility to communication technologies and the universalization of Internet access, especially in the Western world countries, lead to future challenges concerning the mental health services offered. The last two decades Internet-supported mental health interventions range from psychoeducational webpages and interactive self-help programs, to videoconferencing, online groups seminars or support groups, and online therapy (Barak & Grohol, 2011).

The addition of online interventions to other forms of health care began the scientific dialogue concerning their contribution and standards practices. Internet interventions provide more affordable and accessible ways to mental health resources (Bolier& Abello, 2014), while current practices implemented are constantly reviewed (Parks, 2014).

The growing interest in online mental health interventions coincided with the growing research of online positive psychology interventions. Ritterband and colleagues (2003) defined online interventions as: "Interventions typically focused on behavioral issues, with the goal of instituting behavior change and subsequent symptom improvement" (p. 527). In the context of positive psychology, online positive psychology interventions add in the aim of the symptom improvement the increase of well-being (Bolier & Abello, 2014), which is addressed not only to specific groups, but also to the general population (Seligman, Steen, Park, & Peterson, 2005). Thus, the use of online positive psychology interventions started from the early development of positive psychology interventions, providing both health promotion and care to general public and specific treatment groups (Bolier & Abello, 2014).

Several meta-analyses that examine the efficacy of online positive psychology interventions have shown positive results. Online positive psychology interventions resulted to improved wellbeing levels in the general population (Schueller & Parks, 2012) and minor decrease of mental illnesses symptoms (Bolier & Abello, 2014). The

effectiveness presupposes several standards during application (e.g. the engagement of the participants) (Kenders, 2019). Despite the challenges, research evidence supports the effective use and future development of online mental health interventions (Barak & Grohol, 2011).

The COVID-19 pandemic and the subsequent COVID-19 crisis affected mental health services, but also offered the opportunity of improvement of mental health interventions. Mental health and well-being (United Nations, 2020) are critical to the society functioning. Through the Covid-19 pandemic innovative ways of providing mental health services have been emerged to keep up with the new situation, which is continually transformed.

According to the Policy Brief of the COVID-19 published by the United Nations (2020) many services switched to remote mental health care, focusing on digital self-help, digital mental health services and parenting programs (including the use of more basic technologies such as the telephone and SMS). The multiplication of these approaches reinforced the online interventions in order to respond to mental health needs, opening a new path to applied mental health interventions.

The intersection of COVID-19 and mental health led to a new era of mental health services provided to the population due to the mounting evidence that the COVID-19 pandemic has great impact on mental health and wellbeing of both affected and not affected populations worldwide. In patients infected with SARS-CoV-2, a metanalysis of Rogers and colleagues (2020) indicated high levels of anxiety disorders, depression, and post-traumatic stress disorders. Impairment in social functioning which is, also, included in the effects, found to have great impact, thus, suggesting that there are many ways in which mental health might be adversely affected by the pandemic (Rogers et al., 2020). In non-affected population, recent studies shown increased levels of stress during the pandemic and the confinement (de Quervain et al. 2020; Shanahan et al., 2020). The mental consequences of COVID-19 included a) economic, b) psychosocial stressors, and c) emotional distress; children, young people, people with pre-existing mental health conditions, health care workers, and relatives of patients with COVID-19 have presented emotional vulnerability during the pandemic (Behrmann & Spiegel, 2020; Shanahan et al., 2020).

The mental health effects of the pandemic not only concern individuals but extend to relational level and especially to family functioning. Recent studies evidenced that COVID-19 crisis and COVID-19 restrictions had the following negative results to

health and well-being across the family network, when parental support was absent: (1) undermined parents and children well-being (Spinelli, Lionetti, Pastore, & Fasolo, 2020), (2) led to greater parent-child dyadic stress, and (3) increased risk of child maltreatment (Brown, Doom, Lechuga-Peña, Watamura, & Koppels, 2020).

Parenting Programs. There is an abundance of researches on group parenting programs that enhance parental functioning both in international and Greek scientific literature. Konstantinidis (2011) supported that group parenting education seems to begin in the early 1970s, in the United States and the United Kingdom adopting a behavioral approach; later it was developed rapidly throughout Europe. In Greece, the first parent schools were organized in the form of lectures-discussions, by various women's associations starting 1962 with parent schools of M. Khourdaki.

The aim is similar to both English and Greek programs. In the English literature, most of the programs aimed at informing parents, changing their attitudes and perceptions, and strengthening the parental role; the programs were called: parent education, family life education, parenting education, parent training, parent group training program, family education, family learning και parental support. In the Greek literature parent education aimed to help parents: a) to improve communication and relationship with their children, and b) to cultivate skills, so that they manage the problematic behaviors of children (Konstantinidis, 2011).

The programs can be categorized by their content. Konstantinidis (2011) distinguished 5 categories of parenting programs in Greece: (1) Parents' Schools (Panhellenic Association of Parents' Schools), (2) Parents' Schools I.D.E.K.E. (Institute of Continuing Adult Education), (3) Effective Parent Training Seminar, (4) Group parenting programs of OKANA, and (5) Parents' Schools of the Archdiocese of Athens. Pappa (2003) reported three categories of programs in the English-language: (1) knowledge transfer programs which aim to change the quality of parent-child communication (e.g. Gordon's 1975 Parent Effectiveness Training program), (2) transaction perspective programs which aim to combine scientific information with personal experiences of parents, (3) transformation perspectives programs, which aim to change the environment and enhance the self-awareness of unwanted behavior of both parents and children.

Examples of psychoeducational parenting programs and preventive interventions that adopt a positive perspective are the following:

✓ 123 Magic (Bloomfield & Kendall, 2012)

- ✓ Incredible Years (Webster-Stratton, 2005)
- ✓ Triple P (Positive Parenting Program) (Sanders, 2008)
- ✓ Positive Discipline program (Nelsen, 2006)
- ✓ Emotion Coaching: The Heart of Parenting Online course (The Gottman Institute, 2020)

Activities of Positive Psychology. In psychoeducational groups and positive psychology interventions, content and experience are processed with multiple practices and activities that aim to engage the participants and motivate cognitive and emotional processing.

The activities applied to positive psychology interventions vary. Activities may be used independently as positive interventions that aim the improvement of specific positive psychology concepts or may be used in combination with others to form a positive psychology interventional program. We will refer to some positive psychology activities and exercises, which we used – with their initial form or with some modifications – to design the positive psychology intervention of positive relationships between parents and children. The activities mentioned bellow have been proposed by three sources: (1) research studies on positive psychology concepts; (2) training packages of the European EAGLES EU (Pezirkianidis, Karakasidou, & Stalikas, 2017), HOPEs EU (Pezirkianidis, Lakioti, Stalikas, Karakasidou, & Galanakis, 2018) and SUCCESS EU (Pezirkianidis, Yotsidi, Koudigkeli, & Stalikas, 2019) programs; and (3) UC Berkeley's Greater Good Science Center, which launched Greater Good in Action – a collection of research-based methods for a happier, more meaningful life.

Cooking a successful recipe for Positivity (Pezirkianidis et al., 2019). In this activity participants are asked to imagine their future life and create a recipe with the most important ingredients.

The Eyeglasses of Positivity (Pezirkianidis et al., 2017). In this activity participants are asked to wear the filter of positivity. With the filter, negative emotions are still experienced, but the person recognizes and focus on the positive aspects of the situation.

Gratitude Journal – three good things (Emmons & McCullough, 2003; Greater Good in action). In this activity participants write daily a journal, where they write down three things that went well for every day and provide an explanation why they went well. By taking the time to consciously express positivity and gratitude, they remember that they already have in their lives things that they should be grateful for.

Reframe the narrative by recognizing the best in you (adaption from Pezirkianidis et al., 2017). In this activity participants are asked to positive reframe one of their narratives and try to reconsider things in a positive light.

Inventory of strengths (Pezirkianidis et al., 2018; Peterson & Seligman, 2004). In this activity participants are asked to complete VIA-IS or Via-Youth (depending on their age) online in order to find their character strengths.

The strengths wheel (Pezirkianidis et al., 2017; 2018; 2019). In this activity participants are asked to identify their strengths by filling in a graphical representation of a circle like a wheel. The Strengths Circle can be used to make a graphical representation of the extent to which strengths are used (current use) and the room that exists to use the strengths more (scope). The center of the circle represents a score of '0' and the outer rim a score of '10'. The participants are asked to place two marks in each segment of the circle indicating the extent they currently use that strength in the chosen context and how much scope there is for using that strength more in that context. Next, they have to draw a triangle that connects the two marks. The bigger the gap between the current use and the scope, the bigger the triangle should be and the more potential there is for using that strength more.

Family tree of signature strengths (Pezirkianidis, Karamanlis, & Charalambous, in press; Seligman, Rashid, & Parks, 2006). In this activity, each family member is invited to complete the VIA-IS online and recognize what its signature strengths are. Then the members imprint their signature strengths on the paper on a tree. An important part of this activity is the discussion that follows.

Active listening (Greater Good in action). In this activity, there are two participants; one invites the other to share what's on his or her mind. As he or she does so, the first participant tries to follow the seven steps of active listening: paraphrase, ask questions, express empathy, use engaged body language, avoid judgement, avoid giving advice, take turns.

Essentials for Positive Communication (Pezirkianidis et al., 2019). In this activity, participants are introduced to some of the most common errors, obstacles or mistakes of communication and ways to overcome those errors, obstacles or mistakes, so that the communication can be more effective, positive and solution focused.

Recall a Positive Moment (Pezirkianidis et al., 2017; 2018). In this exercise, participants are asked to recall a positive moment. Recalling pleasant experiences lets them re-experience that positive moment in their present space. By focusing on positive

experiences, they can disempower the negative ones, becoming more aware of their positive emotions, as well as of their strengths.

Magic five hours (Gottman & Silver, 1999; Pezirkianidis, Giotsidi, Prassa, & Petratou, in press; Seligman, Rashid, & Parks, 2006). This activity was primarily developed for partners, but it can be applied with modifications on different kind of relationships. According to Gottman and Silver (1999), the partners of happy marriages spend at least five hours each week on behaviors that strengthen and nurture their relationship. In this activity, the partners are asked to apply specific positive feedback behaviors for at least five hours a week.

Savoring activities (Bryant & Veroff, 2007). As mentioned earlier, there are ten strategies-activities that participants can follow in their daily life to maximize positive experience: sharing with others, memory building, self- congratulation, sensory-perceptual sharpening, comparing, absorption, behavioral expression, temporal awareness, counting blessings, and kill-joy thinking.

The Study

Aim

Research findings indicate that strong and stable relationships in the family and positive and facilitative approach to parenting affect positively child's healthy development and lead to positive outcomes for both children and parents, and the family functioning as well (DCSF 2009; O'Brien & Mosco, 2012).

The current study aims at combining the field of positive psychology with essential theories and principles of relationships and parenting models by proposing a model of enhancing positive relationships between parents and children.

The purposes of the present study are: a) to develop an intervention of positive relationships between parents and children, b) to apply the positive psychology intervention enhancing positive relationships between parents and children and c) to measure the effectiveness of the positive psychology intervention in groups of Greek parents.

It is the first Greek study to apply an intervention parenting program to investigate parenting from a positive psychological concept. The intervention hopes to promote positive parenting, emotion-related parenting styles and the mental health continuum of parents. It is hoped that the findings will provide a valuable insight into the positive psychological variables that promote positive relationships between parents and children. The study will hopefully indicate that parents, who participated into psychoeducational groups, can adopt new strategies to build positive relationships with their children

Scientific questions

The scientific questions of the present study are the following:

- A) Are there differences between the experimental group and the control group before and after the applied intervention in the way parents perceive positive parenting?
- B) Are there differences between the experimental group and the control group before and after the applied intervention in the parenting styles parents adopt?
- C) Are there differences between the experimental group and the control group before and after the applied intervention in the well-being of parents?

Method

Design. The current study employed an analysis of variance design. The survey design used 2x2 repeated measures analysis of variance (i.e., the repeated measures MANOVA) to compare any differences in multiple dependent variables among different groups.

To explore a) the improvement of positive relationships between parents and children in terms of positive psychology constructs, and b) the effectiveness of the applied intervention repeated measures were used to test the assumed cause-effect relationship between the experimental and the control groups (independent groups) and the factors (dependent variables).

The repeated measures analysis of variance was used to determine whether there are any differences in multiple dependent variables (factors) between experimental and control groups, where participants have been measured filling in three questionnaires pre and post the intervention.

In the currents study 49 parents were divided into experimental group (two subgroups) that participated the positive psychology intervention of building positive relationships and one group that did not participate any interventional program. Before and after the intervention all the participants of the groups completed three questionnaires, measuring the positive parenting, the emotion coaching and the mental health continuum. The questionnaires were partitioned into components (factors) that together are used to assess the improvement of the relationships between parents and children, and therefore the effectiveness of the intervention applied in the experimental group.

Participants. The study involved 49 Greek parents (91.8% females), having at least one typically developed child from 4-15 years old. Parents participated voluntarily and received a certificate of attendance for their participation in the program. The mean age of the sample was 41.43 years (SD = 5.85). From the entire sample, most of the participants were married (85%, N = 42), and university graduates (36.7%, N=18) (for a detailed description of demographic characteristics see Table 1).

Table 1. Participants' demographic characteristics

| Variable | N | % |
|--------------------|----|-------|
| Gender | | |
| Male | 4 | 8.20 |
| Female | 45 | 91.80 |
| Marital status | | |
| Married | 42 | 85.70 |
| Divorced | 4 | 8.20 |
| Widowed | 0 | 0 |
| Other | 3 | 6.10 |
| Level of education | | |
| Secondary | 7 | 14.30 |
| Degree (TEI) | 6 | 12.20 |
| Degree (AEI) | 18 | 36.70 |
| Master | 15 | 30.60 |
| PhD | 2 | 4.10 |
| Other | 1 | 2.00 |
| Number of children | | |
| 1 child | 20 | 40.80 |
| 2 children | 20 | 40.80 |
| 3 children | 8 | 16.30 |
| 4 children | 1 | 2.00 |

Note. N = 49

The participants formed three groups of parents. For the purposes of the study the experimental group was divided in two sub-groups, while there was one control group. The first (N=18) and second group (N=16) of parents constituted the experimental groups, in which the positive psychology intervention was applied, and the third group (N=15 participants) constituted the control group, in which no intervention was applied. The mean age of the 1st group was 39.39 years (SD=4.74), the mean age of the 2nd group was 40.81 years (SD=4.57) and mean age of the control group was 44.53 years (SD=7.19). There were no significant differences between the two experimental sub-groups, which formed the experimental group.

Materials. For the purposes of this study three measurement tools presented bellow were used to collect data. The questionnaires are available in Appendix II in Greek and English version.

Nicomachus-Positive Parenting (NPP) Questionnaire. This scale developed by Kyriazos and Stalikas (2019) measures positive psychology parenting. The measure contains 20 items rated on a 5-point Likert scale (1 = Absolutely Untrue, 2 = Mostly Untrue, 3 = Can't Say True or Untrue, 4 = Mostly True, 5 = Absolutely True). All items are developed for children from 7-13 years. The highest the score the highest the

perceived positive psychology parenting. Nicomachus questionnaire includes four factors of measuring positive parenting: factor 1 = nurturing values (items 1-9), factor 2 = strength identification & boosting (items 10-14), factor 3 = parenting context (items 15-17), and factor 4 = involvement (items, 18-20). The questionnaire demonstrates very good internal consistency; alpha reliabilities were: .93 for the overall questionnaire and .92, .85, .80, .75 respectively for each factor (Kyriazos & Stalikas, 2019). In the present study Cronbach's α ranges from .87 to .72 indicating good internal consistency (for a detailed description of Cronbach's α see Table 2).

Table 2. Cronbach's alpha for NICOMACHUS-Positive Parenting (NPP) Questionnaire

| Indicator | Alpha |
|---|-------|
| NPP total pre | .88 |
| Nurturing values pre | .86 |
| Strength identification & boosting pre | .78 |
| Parenting context pre | .84 |
| Involvement pre | .65 |
| NPP total post | .88 |
| Nurturing values post | .83 |
| Strength identification & boosting post | .83 |
| Parenting context post | .79 |
| Involvement post | .72 |

Note: pre=1st measurement before the intervention, post=2nd measurement after the intervention, α = Cronbach's alpha coefficient

Emotion-Related Parenting Styles -ERPS. This questionnaire assesses parental emotion socialization practices according to the four types of parents and the effects of this emotion-related parenting style on their children, proposed by Gottman and colleagues (1997). ERPS is 20-item shorted version of the 81-item true/false Emotion-Related Parenting Styles Self-Test—Likert (Gottman et al., 1997), modified by Hakim-Larson, Parker, Lee, Goodwin, and Voelker (2006). Paterson and colleagues (2012) developed the 20-item scale measured on a 5-point Likert and identified 4 factors: emotion coaching (items 3, 6, 8, 15, 19), parental acceptance of negative emotion (items 1, 4, 10, 11, 14), parental rejection of negative emotion (2, 5, 9, 12, 16), and feelings of uncertainty-ineffectiveness in emotion socialization (7, 13, 17, 18, 20). The 4-factor short form showed good validity and reliability, with Cronbach's alphas ranging from .70 to .80 (Paterson et al., 2012). In the present study Cronbach's α indicates acceptable internal consistency in the subscales (for a detailed description of Cronbach's α see Table 3). The questionnaire was used in Greek after a translation and back-translation from four translators.

Table 3. Cronbach's alpha for Emotion-Related Parenting Styles -ERPS Questionnaire

| Indicator | Alpha |
|---|-------|
| Emotion coaching pre | .53 |
| Parental acceptance of negative emotion pre | .70 |
| Parental rejection of negative emotion pre | .84 |
| Feelings of uncertainty-ineffectiveness in emotion socialization pre | .81 |
| Emotion coaching post | .67 |
| Parental acceptance of negative emotion post | .69 |
| Parental rejection of negative emotion post | .78 |
| Feelings of uncertainty-ineffectiveness in emotion socialization post | .71 |

Note: pre=1st measurement before the intervention, post=2nd measurement after the intervention, α = Cronbach's alpha coefficient

Mental Health Continuum Short Form-SF Questionnaire. Mental Health Continuum Short form (MHC-SF) is a 14-item psychometric tool (Keyes et al., 2008), adapted from the 40-item MHC. The MHC-SF measures wellbeing using a 6-point scale. Each of the 14 items corresponds to three dimensions of well-being. Items 1-3 refer to emotional well-being, items 4-8 corresponds to social well-being, and items 9-14 correspond to six dimensions of psychological well-being. The MHC-SF has been translated and adapted and psychometrically tested in various cultural contexts, including Greece (Ferentinos et al., 2019). The questionnaire indicates adequate internal consistency: above 0.90 for the total MHC-SF and above .78 for the subscales (Ferentinos et al., 2019). In this study alpha reliabilities were: .87, .88, .90, .75 respectively for each dimension of well-being and above .91 for the total questionnaire (for a detailed description of Cronbach's α see Table 4).

Table 4. Cronbach's alpha for Mental Health Continuum Short Form-SF Questionnaire

| Indicator | Alpha |
|-------------------------------|-------|
| MHC total pre | .91 |
| Emotional well-being pre | .82 |
| Social well-being pre | .80 |
| Psychological well-being pre | .89 |
| MHC total post | .94 |
| Emotional well-being post | .87 |
| Social well-being post | .88 |
| Psychological well-being post | .91 |

Note: pre=1st measurement before the intervention, post=2nd measurement after the intervention, α = Cronbach's alpha coefficient

According to Keyes and colleagues (2008), the MHC-SF item scores were also used to distinguish three categories: flourishing, moderate, and languishing. Participants who answered "every day" or "almost every day" at least once in the

emotional well-being scale and at least 6 times across 11 items measuring social and psychological well-being were diagnosed with flourishing. Participants who "never" or "once or twice" experienced for at least 1 item from the emotional well-being scale and at least 6 items on the social and/or psychological well-being scales were diagnosed with languishing. The respondents classified neither as flourishing nor as languishing are moderately mentally healthy.

Participants demographics. The form asked participants to provide their demographic data: gender, age, education, marital status, number of children, gender and age of children (for a detailed description of demographic characteristics see Table 1).

Procedure

The study was approved by Panteion University before data collection. The followed procedure was according to the ethical principles of psychologist and code of conduct proposed by the American Psychological Association.

The intervention was implemented in April and May of 2020 (during the Covid-19 first quarantine period in Greece). The intervention announcement explained the program applied and asked for participants. The announcement was shared via mail and social media to various institutions and schools around Greece, searching for participants in order of priority. An effort was made to include participants from different regions of Greece.

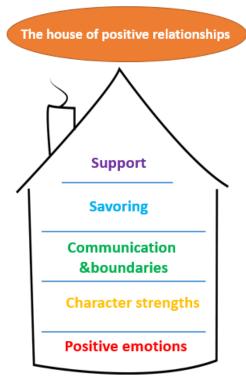
All participants were informed about the nature and the aim of the study before completion of the questionnaires. Information were also given regarding the confidentiality and anonymity of the study, and the participants' right to withdraw from the study at any point. Those who interested in participating provided their consent by proceeding to online completion of the questionnaires via Google forms one week before and after the intervention.

The participants were distributed randomly and equally into 3 groups of parents. The first and second sub-group of parents constituted the experimental group, in which the positive psychology intervention was applied, and the third group constituted the control group, in which no intervention was applied. The participants of the experimental group were asked to participate in the online positive psychology intervention via the Internet Application Cisco WebEx Meeting, once a week for 5 consecutive weeks. The participants had to attend all the online meeting in order to successfully complete the program. Each initial group included 20 participants. Every

week an email was sent with all the details of the meeting and the link. Requirements of the attendance were: a) internet access, b) a camera, and c) a microphone. Instructions for use were also given to all participants. After the completion of the intervention, there was the possibility for the participants of the control group to attend a short version of the intervention. All participants were thanked for participating and were given contact details of the researcher in case they needed further information about the results or study in general.

Statistical Analysis. The data collected was analyzed using the Statistical Package for the Social Sciences (SPSS) v.25. The internal consistency of all scales was checked with Cronbach's α reliability. A series of normality tests was conducted. Finally, repeated measures analysis of variance was performed to investigate the scientific questions of the study.

The Applied Positive Psychology Intervention: The house of positive relationships The intervention was named "The house of positive relationships" and included five meeting (see Figure 1). Each one and half hour meeting focused on a specific topic. The aim of the intervention was to build the house of positive relationships by adding each week a key element that promotes flourished relationships. The topic of the first meeting was positive emotions. The second week focused on strengths. The topic of



the third week was communication and boundaries in relationships. In the middle of the intervention an approach on these issues was chosen to maintain a balance between positive and negative aspects relationships. In the fourth week, participants were introduced in the concept of savoring. In the last week there was a summary of all the concepts introduced previous weeks. The participants had the opportunity to discuss gains from the program and share their thoughts and emotions. The structure of the program is presented in detail below.

Figure 1. The house of positive relationships

Table 5. Structure of intervention: The house of positive relationships

| Meeting | Concept presented | Activities | Home activities |
|---------|-------------------|----------------------------------|----------------------|
| 1st | Positive emotions | Cooking a successful recipe for | Gratitude Journal of |
| | | positivity | positive parent |
| | | The eyeglasses of positivity | |
| 2nd | Strengths | Reframe the narrative by | Family tree of |
| | | recognizing the best in you | signature strengths |
| | | The strengths wheel | |
| 3rd | Communication & | Applying active listening in the | Reading an article |
| | boundaries | parent-child relationship | |
| | | Essentials for positive | |
| | | communication | |
| 4th | Savoring | Recall a positive moment | Savoring journal of |
| | | Stop kill-joy thinking | positive parent |
| 5th | Summary & | Video & discussion | Magic five hours |
| | closure: support | Motto: "The house of positive | |
| | | relationships" | |

In the first online meeting general information were given concerning the program structure. The basic rules of the group, the obligations and the rights of its members were discussed. Following, an introduction in positive psychology and the concept of positive emotions – its basic role in life and relationships – were presented. The role of positive emotions in family life was investigated, as well as ways of approaching positivity in parent-child relationship were examined. After the presentation, the participates were engaged in the activities: a) cooking a successful recipe for positivity, b) the eyeglasses of positivity. The meeting was ended with a summary by asking the participants to express their feelings through a graphic representation. After the meeting the participants received via email, the first home activity: the gratitude journal of positive parent. They were asked to write every day three good things in their daily lives with their children. In the end of the week there were also asked to answer three following open questions: (1) What are your impressions from the first online meeting? Was there anything interesting or difficult for you? (2) During the past week, did you apply any of what we discussed in your relationship with your children? (3) What are your impressions about the home activity?

The second online meeting was initiated with a synopsis of the previous meeting and a discussion for the home activity. An introduction in strengths and virtues was followed by focusing on the positivity and the role of incorporating the positive strengths in individual's narrative. The role of positive strengths in family life was investigated, and ways of identifying and focusing on children's strengths were discussed. The participates were engaged in two activities: a) reframe the narrative by recognizing the best in you, b) the strengths wheel. The meeting was ended with a summary asking the participants to express their feelings through a drawing. Following the meeting, participants received via email the second home activity: the family tree of signature strengths. They were asked to spend time with their children and identify the signature strengths of the family members. By the end of the week participants were asked to answer three questions, as in week one: (1) What are your impressions from the second online meeting? Was there anything interesting or difficult for you? (2) During the past week, did you apply any of what we discussed in your relationship with your children? (3) What are your impressions about the home activity?

As happened in previous week, the third online meeting included a synopsis of last meeting and discussion for the home activity. In this week the concepts of communication and boundaries in the parent-child relationship were presented. The participates were engaged in two activities: a) applying active listening in the parent-child relationship, and b) essentials for positive communication. The meeting was ended with a summary and a depiction of participants feelings. Thereafter, the participants received email with the third home activity. In this week the participants were asked to carefully read an online article about practices that parents around the world adopt to raise their children. No further task was assigned, because it was considered that parents should have time to process all the new information acquired from the three first meetings. Again, participants had to answer three questions: (1) What are your impressions from the third online meeting? Was there anything interesting or difficult for you? (2) During the past week, did you apply any of what we discussed in your relationship with your children? (3) What are your impressions about the home activity?

In the fourth online meeting, the concept of savoring was introduced subsequent to the synopsis of the third meeting. The role of savoring in positive relationships was described, and strategies of applying savoring in the parent-child relationship were discussed. The participates were engaged in two activities: a) recall a positive moment,

and b) stop kill-joy thinking. The meeting end followed the structure of former meetings. After the meeting the participants received via email the fourth home activity: the savoring journal of positive parent. In this activity participants were asked to choose 2-3 strategies of savoring and try to apply them in their everyday life with their children by writing down what happened. By the end of the week participants were asked to answer three questions: (1) What are your impressions from the fourth online meeting? Was there anything interesting or difficult for you? (2) During the past week, did you apply any of what we discussed in your relationship with your children? (3) What are your impressions about the home activity?

The last meeting comprised a discussion about a) the components that build the house of positive relationships, and b) the tools parents can use to support their children and cultivate positive relationships in the family. The video "What makes a good life? Lessons from the longest study on happiness." was presented and analyzed. The participants were asked to share their thoughts, emotions and questions and a discussion followed. In the end the participants were asked to express their feelings through a graphic representation of a bridge. Also, participants were asked to write on a paper a motto of "The house of positive relationships", which they could trace back, whether they need. After the meeting the participants received via email the fifth home activity: the magic five hours. The email included instructions for the completion of questionnaires and the certificate of attendance.

Results

Descriptive statistics analyses and normality tests were first performed to describe the data under exploration. The main analyses followed.

Normality Tests

Shapiro-Wilk tests of normality were performed on each factor at both pre and post measurements. The Shapiro-Wilk tests showed p value was greater than the chosen alpha level (p< 0.05), and then the null hypothesis could not be rejected for the following factors: nurturing values, strength identification & boosting, emotion coaching, parental acceptance of negative emotion, parental rejection of negative emotion, feelings of uncertainty-ineffectiveness in emotion socialization, social well-being and psychological well-being. For example, nurturing values scored .77 and .93 on experimental group and control group at the first measurement, and .86 and .92 at the second measurement. Contrary, for parenting context, involvement and emotional well-being Shapiro-Wilk indicated p value of less than .05. Parenting context scored .10 and .29 on experimental group and control groups at the first measurement, and .02 and .08 at the second measurement.

Table 6. Shapiro-Wilk test of normality for Nicomachus questionnaire factors

| Factor | Group | Shaj | piro-Wil | k |
|------------------------------------|--------------------|-----------|----------|------|
| | _ | Statistic | df | Sig. |
| Nurturing values pre | Experimental group | .77 | 34 | .00 |
| | Control group | .93 | 15 | .34 |
| Strength identification & boosting | Experimental group | .96 | 34 | .26 |
| pre | Control group | .96 | 15 | .79 |
| Parenting context pre | Experimental group | .91 | 34 | 77 |
| | Control group | .86 | 15 | .02 |
| Involvement pre | Experimental group | .88 | 34 | .00 |
| _ | Control group | .93 | 15 | .33 |
| Nurturing values post | Experimental group | .86 | 34 | .00 |
| | Control group | .92 | 15 | .20 |
| Strength identification & boosting | Experimental group | .96 | 34 | .24 |
| post | Control group | .92 | 15 | .19 |
| Parenting context post | Experimental group | .92 | 34 | .02 |
| | Control group | .89 | 15 | .08 |
| Involvement post | Experimental group | .87 | 34 | .00 |
| - | Control group | .90 | 15 | .11 |

Note: pre=1st measurement before the intervention, post=2nd measurement after the intervention

Repeated measures

According to normality tests, 2x2 repeated measures analysis of variance was performed to answer to the scientific questions of the study and investigate the positive relationships between parents and children by exploring the assumed cause-effect relationship between the experimental and the control groups on the following factors:

a) nurturing values and strength identification & boosting from the Nicomachus questionnaire, b) all four factors of ERSP questionnaire, emotion coaching, parental acceptance of negative emotion, parental rejection of negative emotion, feelings of uncertainty-ineffectiveness in emotion socialization, and c) social well-being and psychological well-being from the MHC-SF questionnaire.

The following tables illustrate the differences confirmed in social well-being between the experimental and control groups. Table 7 shows that social well-being was not significant different (p = .40, p > .05) to the whole sample. Descriptive statistics revealed that the mean score of control group was 16.46 at the first measurement and 14.73 at the second measurement, while the mean score of the experimental group was 14.29 and 15.08 before and after the intervention.

Table 7. Tests of Within-Subjects Contrasts for social well-being

| Factor | Type III Sum | df | Mean | F | Sig. | Partial Eta |
|---------------------------|--------------|----|--------|------|------|-------------|
| | of Squares | | Square | | | Squared |
| Social | 4.59 | 1 | 4.59 | .69 | .40 | .01 |
| Social well-being * group | 33.24 | 1 | 33.24 | 5.02 | .03 | .09 |
| Error (Social well-being) | 311.24 | 47 | 6.62 | | | |

Note: Mauchly's test of sphericity has not been violated.

The arithmetic differences of mean scores were significant. Table 8 demonstrates the significant effect – using the Sphericity Assumed – of social well-being in experimental group after the intervention as F(1, 47)=5.02, p<.05, $\eta_p^2=.09$.

Table 8. Tests of Within-Subjects Effects for social well-being

| Factor | | Type III Sum | df | Mean | F | Sig | Partial Eta |
|--------------|----------------------|--------------|--------|--------|------|-----|-------------|
| | | of Squares | | Square | | | Squared |
| Social well- | - Sphericity Assumed | 33.24 | 1 | 33.24 | 5.02 | .03 | .09 |
| being * | Greenhouse-Geisser | 33.24 | 1.000 | 33.24 | 5.02 | .03 | .09 |
| group | Huynh-Feldt | 33.24 | 1.000 | 33.24 | 5.02 | .03 | .09 |
| | Lower-bound | 33.24 | 1.000 | 33.24 | 5.02 | .03 | .09 |
| Error | Sphericity Assumed | 311.24 | 47 | 6.22 | | | |
| (Social well | l-Greenhouse-Geisser | 311.24 | 47.000 | 6.22 | | | |
| being) | Huynh-Feldt | 311.24 | 47.000 | 6.22 | | | |
| | Lower-bound | 311.24 | 47.000 | 6.22 | | | |

Note: Mauchly's test of sphericity has not been violated.

The results of the other factors showed two things. First there were not significant effects in experimental sub-groups after the intervention, as tests of within-subjects effects for psychological well-being was F(1, 47)=1.94, p=.17, p>.05, $\eta_p^2=.04$, tests of within-subjects effects for nurturing values was F(1, 47)=.59, p=.44, p>.05, $\eta_p^2=.01$, and tests of within-subjects effects for strength identification was F(1, 47)=.14, p=.70, p>.05, $\eta_p^2=.00$. Second, all the factors showed an increase in experimental group, revealing a positive effect of the intervention.

The three following graphs illustrate the effect of an increase in psychological well-being, nurturing values and strength identification at the experimental group. Figure 1 depicts a slight increase of psychological well-being in the experimental group, while the control group present a minor decrease. Figure 2 and 3 reveal a rise of nurturing values and strength identification in experimental and control groups, but the improving trend of experimental group is appeared to be slightly higher.

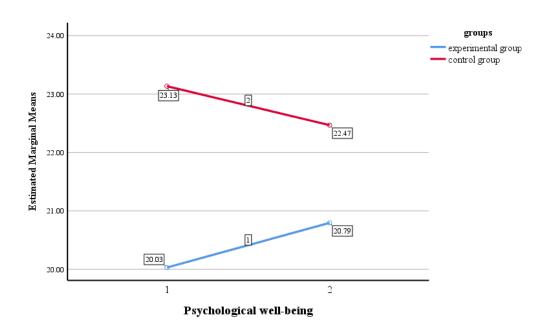


Figure 2. Graph of estimated marginal means in psychological well-being

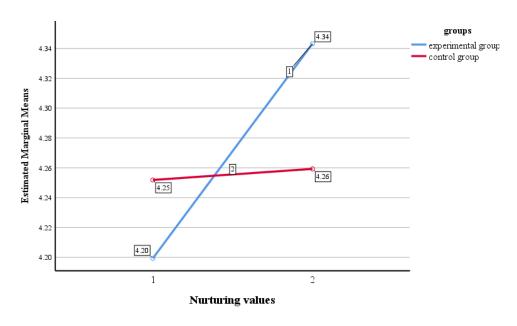


Figure 3. Graph of estimated marginal means in nurturing values

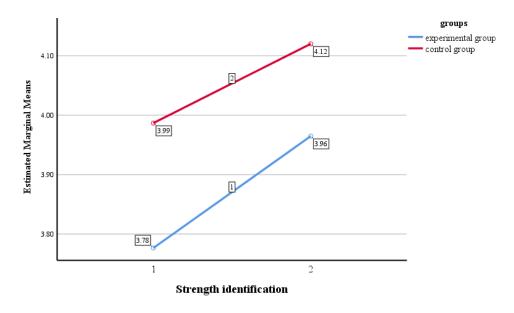


Figure 4. Graph of estimated marginal means in strength identification

A further finding concerns the emotion coaching socialization styles that parents adopt. In all four factors, there were not found significant differences between the experimental and control groups in the alternation of the way parents deal with their emotions and the emotions of their children. Figures 4, 5 and 6 show that emotion coaching, parental acceptance of negative emotion, and parental rejection of negative emotion had slightly change in experimental group after the intervention. Emotion coaching was decreased 0.04, while both acceptance and rejection of negative emotion were marginally increased. Despite the insignificant changes, this analysis found evidence for parental feelings of uncertainty and ineffectiveness with helping their

children deal with emotions. As depicted in Figure 7, the parents in the experimental group demonstrated decreased levels of uncertainty in emotion socialization of their children after the intervention applied, contrary to the finding of control group.

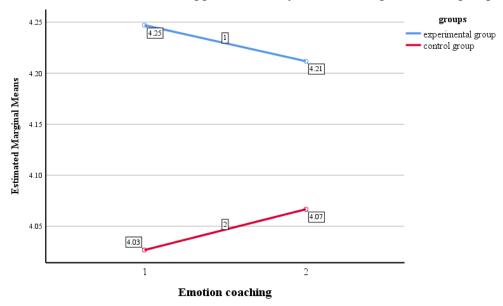


Figure 5. Graph of estimated marginal means in emotion coaching

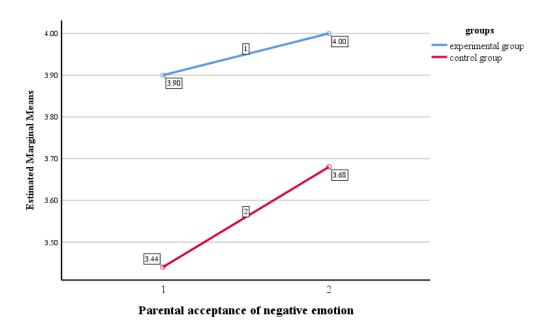


Figure 6. Graph of estimated marginal means in parental acceptance of negative emotion

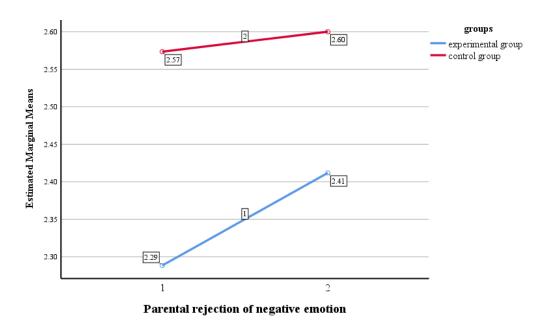


Figure 7. Graph of estimated marginal means in parental rejection of negative emotion

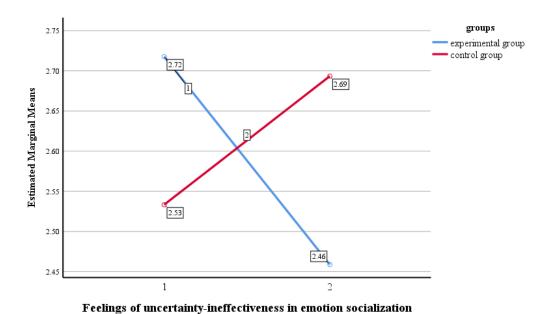


Figure 8. Graph of estimated marginal means in parental feelings of uncertainty and ineffectiveness in emotion socialization

Mann Whitney

According to normality test, the Shapiro-Wilk tests showed p value was less than the chosen alpha level (p<0.05), and then the null hypothesis was rejected for the following factors: parenting context, involvement and emotional well-being. Mann Whitney U test, a nonparametric test of null hypothesis, was used to indicate any significant

differences between the groups before and after the intervention by calculating the difference of the factors values from the two measurements. Mann Whitney U test showed no significant differences for all the three factors. As table 9 reveals $U_{parenting}$ context = 198.00, p=.19, $U_{Involvemen}t$ = 220.50, p=.44 and $U_{emotional\ well-being}$ = 227.00, p=.53.

Table 9. Results of Mann-Whitney U test for the difference in the mean difference of psychological factors between experimental group and control group

| Factor | N.T | Maan | CD | | Percentiles | | | | |
|----------------------|-----|------|------|-------|---------------|------|--------|--------------|-----|
| | 11 | Mean | SD | 25th | 50th (Median) | 75th | U | \mathbf{Z} | P |
| Parenting context | 49 | .02 | .70 | 33 | .00 | .33 | 198.00 | -1.28 | .19 |
| Involvement | 49 | .03 | .71 | 33 | .00 | .33 | 220.50 | 76 | .44 |
| Emotional well-being | 49 | 18 | 2.06 | -1.00 | .00 | 1.00 | 227.00 | 62 | .53 |
| groups | 49 | 1.30 | .46 | 1.00 | 1.00 | 2.00 | | | |

Note: p < .05

Overall analyses

Regarding the observed increasing trend of factors in the experimental group that the short review above revealed, further analyses were carried out to investigate the overall parenting outcome from factors of the Nicomachus questionnaire. The results of positive parenting, despite not being significant, were substantially better after the intervention in the experimental group: as it is illustrated in Figure 8 the mean score of the experimental group was increased from 4.01 to 4.15 after the intervention, while there was not chance in the control group.

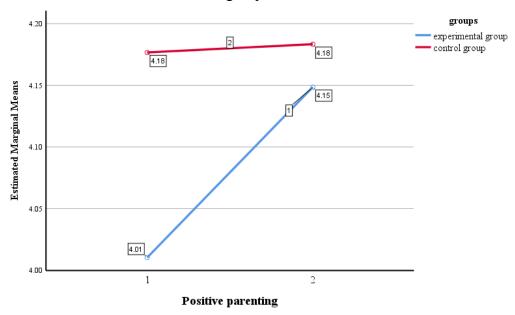


Figure 9. Graph of estimated marginal means in positive parenting

Additionally, the MHC-SF item scores showed the categories in which participants were distributed in the spectrum of well-being. As it is presented in table 10, participants of control group showed no change, while two participants of experimental group were found to meet the standard of flourishing after the intervention applied.

Table 10. Frequency results of experimental and control groups in MCH-SF categories

| Mental Health Continuum categories | | Experime | ental group | Contr | ol group |
|------------------------------------|------|--------------|-------------|-------|----------|
| | | \mathbf{N} | % | N | % |
| Flourishing | pre | 16 | 47.1 | 8 | 53.3 |
| | post | 18 | 52.9 | 8 | 53.3 |
| Moderate | pre | 15 | 44.1 | 7 | 46.7 |
| | post | 13 | 38.3 | 7 | 46.7 |
| Languishing | pre | 3 | 8.8 | 0 | 0.0 |
| | post | 3 | 8.8 | 0 | 0.0 |
| Total | | 34 | 100 | 15 | 100 |

Note: pre=1st measurement before the intervention, post=2nd measurement after the intervention

In conclusion, results of this study indicate the positive relationships between parents and children may be enhanced after the participation in the interventional program. Social well-being seemed to be reinforced after the completion of the intervention, while other significant factors related to positive parenting presented a slight to moderate increase.

Participants answers and opinions

Table 11 indicates participants' answers based on the written questions that were sent to them every week. The participants were engaged in the program they completed the home activities, the majority of them (55%) mentioned that they practiced home activities 2-3 times a week. Only small percentages of participants do not practice some activities (gratitude journal of positive parent: 3.10%, reading an article: 7.10%), while none of the participants mentioned not to have completed an activity once.

Table 11. Application of home activities based on participants' answers

| Application of home activity | Experimen | ıtal group |
|--------------------------------------|-----------|------------|
| | N | % |
| Gratitude Journal of positive parent | | |
| Never | 1 | 3.10 |
| Seldom (1 time) | 1 | 3.10 |
| Sometimes (2-3 times) | 12 | 37.50 |
| Frequently (4-5 times) | 8 | 25.00 |
| Always (every day) | 10 | 31.30 |
| Family tree of signature strengths | | |
| Never | 3 | 11.10 |
| Seldom (1 time) | 3 | 11.10 |
| Sometimes (2-3 times) | 13 | 48.10 |
| Frequently (4-5 times) | 7 | 25.90 |
| Always (every day) | 1 | 3.70 |
| Reading an article | | |
| Never | 2 | 7.10 |
| Seldom (1 time) | 7 | 25.00 |
| Sometimes (2-3 times) | 11 | 39.30 |
| Frequently (4-5 times) | 1 | 3.60 |
| Always (every day) | • | 2.00 |
| Savoring journal of positive parent | | |
| Never | 2 | 5.90 |
| Seldom (1 time) | 7 | 20.60 |
| Sometimes (2-3 times) | 13 | 38.20 |
| Frequently (4-5 times) | 7 | 20.60 |
| Always (every day) | 5 | 14.70 |
| Home activities | | |
| Never | 0 | 0 |
| Seldom (1 time) | 3 | 8.80 |
| Sometimes (2-3 times) | 19 | 55.90 |
| Frequently (4-5 times) | 10 | 29.4 |
| Always (every day) | 2 | 5.90 |

Note. N and % estimated from the participants' answers of the 3 questions

As the written evaluations of participants concerning each week separately and the whole program, they were positive. Bellow we present some examples of their opinions and reflections of their thoughts.

<u>Question:</u> What are your impressions from the first online meeting? Was there anything interesting or difficult for you?

Answer: The first online meeting seemed very interesting to me. I was particularly impressed by the difference between positive thinking and positive behavior. I look forward to the other meetings.

<u>Question:</u> During the past week, did you apply any of what we discussed in your relationship with your children?

- <u>Answer:</u> We were in constant contact due to the covid-19 quarantine at home and there was more time for conversation.
- <u>Question:</u> What are your impressions about the home activity "Family tree of signature strengths"?
- <u>Answer:</u> I was positively impressed by the fact that me and my son agreed on the score of his character strengths.
- Question: What are your impressions about the program? How would you evaluate it?
- <u>Answers:</u> Very constructive and supportive of our role as parents.

It was a well-structured program, there was balance between theory and exercises. The content was interesting, and you could get got an idea so you could reflect on positive relationships.

Excellent, simple and understandable.

Excellent!! Many examples and opportunities for practical application of the theory.

Discussion

The aim of the current study was to enhance the building of positive relationships between parents and children. The mean to this purpose was the development of a positive psychology intervention that was applied in a sample of Greek parents. The study investigated if the applied intervention can promote positive parenting, emotion-related parenting styles and the mental health continuum of parents, by exploring factors that enhance positive relationships between parents and children. The aim of the study was partially achieved as it is depicted in the results. The findings evidence that experimental group (two experimental sub-groups) differed from the control group in factors related to positive parenting and in factors associated with well-being, thus providing insight into factors of positive psychology that play a role in positive parent-child relationship.

The first and the most significant finding concern the increase of social well-being of parents in the experimental group, which was statistically confirmed. The observed change of well-being is yielded only in the social aspect of well-being excluding psychological and emotional well-being. The rise of this factor should be connected to the period that the intervention was applied. The COVID-19 quarantine in Greece sets the background of the human needs in this period of crisis and reflects the challenges pandemic brought into relationships.

The increase of social well-being suggests that parents need support in order to cope with daily problems and face the COVID-19 outbreak. In line with previous studies of the present year the need of immediate supportive interventions for families' mental health is highlighted (Spinelli et al., 2020). Clinical and social benefits derives from this increase, suggesting that parental support firstly leads to better outcomes for mental health of parents, as the need of connection is satisfied even in a period of crisis, and secondly leads to the adoption of positive parenting strategies that enhance positive relationships in the family. Thus, the effect of the intervention in parent-child relationship is mediated through the impact of crisis in parents' social well-being and their need to be socially functioning.

Results also reveal that the other two factors of well-being – emotional well-being and psychological well-being – were stable before and after the intervention; psychological well-being shown a slight increase in the experimental group. This may evidence that impairment in social functioning was greater than the effects on the two other mental health components; a result consistent with what has been found in

metanalysis of Rogers and colleagues (2020). The result demonstrated is compatible with the theory that relates social well-being and psychological well-being to various aspects of prosperity, including engagement and positive relations (Keyes, 2002; Ryan et al., 2008; Ryff, 2014). While emotional well-being relates to feeling well, social and psychological well-being affect functioning mental health state. Keeping in mind the challenges of COVID-19 restriction, it can be deduced that the intervention may do not had an impact on happiness of parents, but do had an impact on their functioning, which was tremendously destabilized due to the quarantine. Similar deduction is verified by the results that depict the way participants are distributed in the spectrum of well-being. Participants of control group showed no change, while a minor number of participants, two participants of experimental group, were found to change category from moderate mentally healthy to flourishing after the intervention applied.

As far as the factors that form positive parenting are concerned, the findings of the experimental group found support for the positive parenting concept, indicating that the intervention applied a) was effective, and b) fulfilled in a large amount its aim towards building positive relationships. The results of positive parenting tended to increase after the intervention in the experimental group, while there was no change in the control group. Two of the four positive parenting factors were improved in experimental group: nurturing values and strength identification. Although, the growing tendency coincided with a small increase of these factors in the control group, the percentage of increase was greater in the experimental group, which is congruent to the overall rise of the experimental group versus the stability of the control group. Comparing our results to those of older studies that implicate exercises of strengths (Proyer, Ruch & Buschor, 2013; Seligman et al., 2005), it must be pointed that the effectiveness of programs targeting character strengths is significant. In our case we surmise that the mediating role of parents – who had to firstly understand the concept and then apply it to their relationship with their children – may slow down the effect. This finding suggests that more time or practice in strengths is needed, so parents can incorporate strengths in their interaction with their children. The last two factors of parenting context and involvement were unimportant to the analysis, which leads to the assumption that the applied intervention lacks in these areas. In fact, the methodologic design of the positive psychology intervention focuses on character strengths and values transmitted via communication, thus these findings are not surprising.

According to the findings, the emotion coaching socialization styles have no change in all groups. Observed increase of parental acceptance and rejection of negative emotion in experimental group is insignificant, as well as the minor decrease of emotion coaching. This might can be explained by the focus of intervention on positive emotions. The analysis provides better results to parental feelings of uncertainty and ineffectiveness with helping their children deal with emotions. Parents in the experimental group demonstrated decreased levels of uncertainty in emotion socialization of their children after the intervention applied, contrary to the finding of control group. This pattern of growth of the results cannot be extrapolated to other parents' groups who may participate in the intervention. However, the fact that previous studies linked parents of children with developmental disabilities with high levels of uncertainty/ineffectiveness in emotion socialization (Paterson et al., 2012) can make us form a hypothesis concerning the two-dimensional approaches that parents adopt. There are indications that when parental expectations are determined by children's difficulties levels of uncertainty/ineffectiveness in emotion are higher, but when are seen through a positive parental expectations approach levels uncertainty/ineffectiveness in emotion are lower.

Conclusion

Limitations

The current study presents an array of limitations. First, the data came from self-report questionnaires, one of which did not comprise the officially translated and validated instruments in Greek language. The measures for emotion related styles has not yet been validated in Greek population; this was the first attempt to collect data regarding these constructs with a reliable, but unofficial translation of the scale, without any prior factor analysis to confirm scale's factor structure. Another limitation of this study includes that the results cannot be generalized because of the non-random sampling and the use a non-parametric equivalent of (instead of repeated measure analysis of variance) to investigate three factors, which reject the null hypothesis. Also, a major limitation includes the low number of male participants. The large range of children's age (from 4-15) can be debated due to the different developmental stages of children and the particular to age practices that their parents may adopt in order to be congruent to their children's needs.

Finally, a significant limitation may be the joint of the two experimental subgroups in the analysis. But we should mention that the intervention was identical and was applied at the same time into the two sub-groups that had no significant differences. Given also the online formation of the intervention plan, which can be considered as a limitation as well, the dynamics of each group were not influenced by the different collection of people – in other words the choice of group was uncorrelated with the results of intervention.

Implications for future research

The present study comprises a first attempt to develop and apply an intervention parenting program in Greek parents to investigate parenting from a positive psychological concept. The findings offer a new insight into the positive relationship of parents and children by suggesting that parents, who participated into psychoeducational groups, can adopt new strategies to build positive relationships with their children.

The study opens a new avenue for further research in positive relationships between parents and children by combining the field of positive psychology with essential theories and principles of relationships and parenting models. The proposed model for the building of positive relationships has to be reassessed and enriched. The findings suggest that more meetings may be valuable, as more time is needed so parents can first adopt new behaviors and then apply them in their interaction with their children. In depth evaluation of this model is still underway as further research and studies with larger samples are essential.

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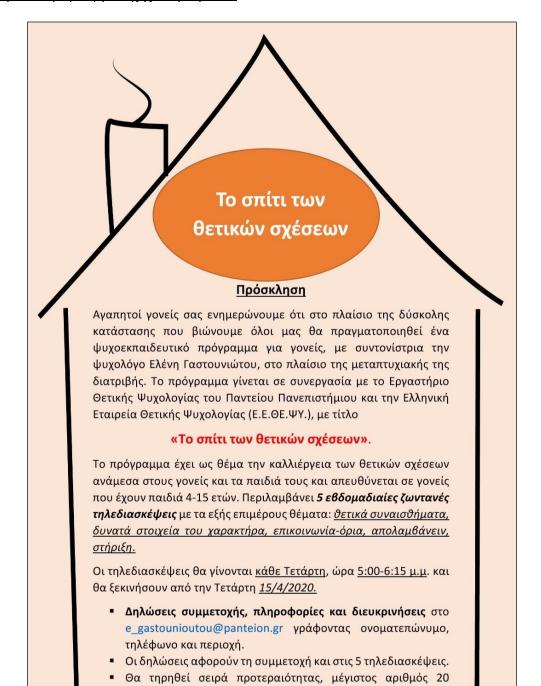
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Appendix

Materials (Greek version)

Πρόσκληση συμμετοχής στην έρευνα



συμμετέχοντες.

Ανακοίνωση για συμμετέχοντα στην έρευνα - Δήλωση συγκατάθεσης

Με το παρόν έγγραφο πιστοποιώ και αναγνωρίζω τα ακόλουθα:

Δηλώνω ότι δίνω τη συγκατάθεση για την εθελοντική συμμετοχή μου στη διαδικτυακή παρέμβαση "Το σπίτι των θετικών σχέσεων". Η συμμετοχή μου αφορά σε έρευνα, η οποία θα διεξαχθεί διαδικτυακά κατά τη διάρκεια πέντε εβδομάδων. Η μελέτη διεξάγεται από την ψυχολόγο και εκπαιδευτικό (ΒΑ, ΒΕd, MSc, MSc candidate) Ελένη Γαστουνιώτου στο πλαίσιο του "ΠΜΣ Ψυχολογία: Κατεύθυνση Θετικής Ψυχολογίας" του Παντείου Πανεπιστημίου Κοινωνικών και Πολιτικών Επιστημών. Η μελέτη έχει ψυχοεκπαιδευτικό χαρακτήρα και αποτελείται από σειρά τηλεδιασκέψεων, όπου θα γίνεται μία παρουσίαση και θα συζητούνται θέματα σχετικά με τις σχέσεις γονέων-παιδιών. Πριν τη λήξη κάθε τηλεδιάσκεψης θα δίνεται στους συμμετέχοντες μια απλή άσκηση για το σπίτι προκειμένου να καλλιεργήσουν τις θετικές σχέσεις με τα παιδιά τους.

Κατανοώ ότι πριν την έναρξη της διαδικασίας θα προηγηθεί μια σύντομη επεξήγηση σχετικά με τη συμμετοχή μου στην έρευνα και θα ενημερωθώ επαρκώς για τη φύση και το σκοπό της μέσω της φόρμας συγκατάθεσης.

Στόχος της παρέμβασης είναι να καλλιεργηθούν τα στοιχεία εκείνα που ενισχύουν τους δεσμούς των γονέων με τα παιδιά τους.

Η διαδικασία που θα ακολουθηθεί είναι η κάτωθι:

Πριν την πρώτη τηλεδιάσκεψη ο/η εκάστοτε συμμετέχων/-ουσα συμπληρώνει κάποια δημογραφικά στοιχεία όπως και ερωτηματολόγια ανώνυμα μέχρι την Τρίτη 14/4/2020 και ώρα 23:59.

Στη συνέχεια, κάθε Τετάρτη απόγευμα λίγο πριν τις 17:00/19:00 θα αποστέλλεται e-mail στο οποίο θα υπάρχει συνημμένος σύνδεσμος, ο οποίος θα οδηγεί στην ηλεκτρονική πλατφόρμα της τηλεδιάσκεψης προκειμένου ο/η εκάστοτε συμμετέχων/-ουσα να παρακολουθήσει ζωντανά και να συμμετάσχει στην τηλεδιάσκεψη.

Πριν τη λήξη κάθε τηλεδιάσκεψης θα δίνεται στους συμμετέχοντες μια απλή άσκηση για το σπίτι προκειμένου να καλλιεργήσουν τις θετικές σχέσεις με τα παιδιά τους. Οι ασκήσεις αυτές αφορούν σε κομμάτια του εαυτού τους και της σχέσης τους με τα παιδιά και στο πώς αυτά συμβάλλουν συνολικά στις θετικότερες σχέσεις. Οι ασκήσεις είναι απλές και ολιγόλεπτες, ενώ θα δίνονται οδηγίες για τον τρόπο που αυτές θα γίνονται τόσο προφορικά όσο και μέσω email.

Στο τέλος της εβδομάδας θα αποστέλλεται μία ηλεκτρονική φόρμα στην οποία κάθε συμμετέχων/-ουσα θα συμπληρώνει ανώνυμα: πώς του φάνηκε η συνάντηση, αν κατά τη διάρκεια της εβδομάδας που μεσολάβησε εφάρμοσε κάτι από αυτά που συζητήσαμε στη σχέση του με τα παιδιά του και πώς του φάνηκε η άσκηση για το σπίτι.

Η συνολική διάρκεια της παρέμβασης είναι πέντε (5) εβδομάδες και το πρόγραμμα είναι το εξής: Τετάρτη 15/4, 22/4, 29/4, 6/5 και 13/5 και ώρα 17:00-18:15/19:00-20:15.

Μετά τη λήξη της πέμπτης εβδομάδας για την επιτυχή συμπλήρωση του προγράμματος χρειάζεται να συμπληρωθούν ερωτηματολόγια τα οποία θα αποσταλούν ηλεκτρονικά. Στη συνέχεια θα δοθούν βεβαιώσεις συμμετοχής σε όσους γονείς ολοκληρώσουν επιτυχώς το σύνολο του προγράμματος.

Δεν υπάρχουν σωστές ή λάθος απαντήσεις: οι τοποθετήσεις κάθε συμμετέχοντα/-ουσας είναι προσωπικές, εθελοντικές και αξιοσέβαστες.

Οποιαδήποτε πληροφορία ή στοιχείο που αφορά σε εμένα κατά τη διάρκεια της μελέτης θα παραμείνουν απόρρητα και οποιαδήποτε δημοσίευση προκύψει από τη

συγκεκριμένη μελέτη θα παρουσιαστεί ομαδικά, με πλήρη ανωνυμία. Τα δεδομένα της μελέτης θα χρησιμοποιηθούν αποκλειστικά για ερευνητικούς σκοπούς.

Αντιλαμβάνομαι ότι δεν υπάρχει απολύτως κανένας κίνδυνος από τη συμμετοχή μου στη μελέτη.

Είμαι ελεύθερος/-η να αποσύρω οποιαδήποτε στιγμή τη συμμετοχή μου από την παρέμβαση και να απαιτήσω τη διαγραφή των στοιχείων μου.

E-mail επικοινωνίας με τον ερευνητή: e gastounioutou@panteion.gr

Εγώ, ο/η υπογραφόμενος/-η κατανοώ τις παραπάνω εξηγήσεις και δίνω τη συναίνεση μου για τη συμμετοχή μου στην εν λόγω έρευνα. Δηλώνω ότι υπογράφω αυτό το Συμφωνητικό Εθελοντικής Συμμετοχής με ελεύθερη βούληση.

| NAI 🗌 | |
|---|--|
| Δημογραφικά στοιχεία | |
| Φύλο: Άντρας 🔲 Γυναίκα | |
| Ηλικία: | |
| Μορφωτικό επίπεδο: | |
| Δευτεροβάθμια εκπαίδευση Τριτοβάθμια εκπαίδευση (ΤΕΙ) Τριτοβάθμια εκπαίδευση (ΑΕΙ) Μεταπτυχιακό Διδακτορικό Άλλο (αν υπάρχει) | |
| Οικογενειακή κατάσταση: Παντρεμένος Διαζευγμένος Χήρος/α Άλλο | |
| Αριθμός παιδιών: | |
| Φύλο και ηλικία παιδιών: | |

Ερωτηματολόγιο Νικόμαχος – Θετική Γονεϊκότητα (NICOMACHUS-Positive Parenting Questionnaire-NPP)

Ακολουθούν είκοσι δηλώσεις για εσάς και την οικογένειά σας, με τις οποίες μπορεί να συμφωνείτε ή να διαφωνείτε. Σημειώστε πόσο συμφωνείτε ή διαφωνείτε με κάθε δήλωση, επιλέγοντας έναν αριθμό από το 1-5, ο οποίος αντιστοιχεί στις εξής απαντήσεις.

1 = Απόλυτα αναληθές, 2= Αρκετά αναληθές, 3 = Δεν μπορώ να πω αληθές ή αναληθές, 4 = Αρκετά αληθές, 5 = Απόλυτα αληθές 1. Προτρέπω το παιδί μου να διατηρεί το χιούμορ του ακόμα και στα δύσκολα. 2. Προτρέπω το παιδί μου να υπερασπίζεται το δίκαιο. 3. Παρακινώ το παιδί μου να λέει πάντα την αλήθεια. 4. Παροτρύνω το παιδί μου να ξαναδοκιμάζει σε ό,τι παλιότερα είχε αποτύχει. 5. Παρακινώ το παιδί μου να αντιμετωπίζει με ενθουσιασμό όλα όσα κάνει. 6. Παροτρύνω το παιδί μου να διαβάζει βιβλία. 7. Προτρέπω το παιδί μου να κάνει το σωστό, ακόμα και όταν δεν είναι προς όφελός του. 8. Προτρέπω το παιδί μου, όταν συμμετέχει σε ομαδικές δραστηριότητες, να παρακινεί και να υποστηρίζει τους υπόλοιπους. 9. Παροτρύνω το παιδί μου να δίνει μια δεύτερη ευκαιρία στους άλλους. 10. Είμαι σε ετοιμότητα ώστε να ξεγωρίσω ποιες είναι οι αρετές του παιδιού μου Ορισμένα προτερήματα του παιδιού μου είναι πιο έντονα από άλλα. 11. 12. Θα μπορούσα να πω ότι γνωρίζω επαρκώς τα ισχυρά σημεία του χαρακτήρα του παιδιού μου. 13. Ενθαρρύνω το παιδί μου οι σπουδές του να βασίζονται στα ισχυρά σημεία του χαρακτήρα του. 14. Φροντίζω οι εξωσχολικές δραστηριότητες του παιδιού μου να καλλιεργούν τα ισγυρά σημεία του χαρακτήρα του. 15. Δεν έχω ιδιαίτερα προβλήματα στον γάμο ή στη σχέση μου. Έχω καλή σχέση με το στενό οικογενειακό μου περιβάλλον. 16. Ο/Η σύζυγός μου/σύντροφός μου με στηρίζει όταν το έχω ανάγκη. 17. Βοηθάω το παιδί μου να κάνει τα μαθήματά του. 18. Συνοδεύω το παιδί μου στις εξωσγολικές του δραστηριότητες. 19. 20. Ενημερώνομαι συχνά από τους δασκάλους του παιδιού μου.

Ερωτηματολόγιο Γονεϊκών Στυλ Συσχετιζόμενων με το Συναίσθημα (Emotion-Related Parenting Styles Self-test-ERPS)

Αυτό το ερωτηματολόγιο απευθύνει ερωτήσεις σχετικά με τα συναισθήματά σας αναφορικά με τη λύπη, τον φόβο και τον θυμό στον εαυτό σας και στα παιδιά σας. Για κάθε πρόταση παρακαλώ σημειώστε την επιλογή που αντιπροσωπεύει καλύτερα το πώς νιώθετε, επιλέγοντας έναν αριθμό από το 1-5, ο οποίος αντιστοιχεί στις παρακάτω απαντήσεις. Εάν δεν είστε σίγουρος/η, επιλέξτε την απάντηση που σας ταιριάζει περισσότερο.

1 = Απόλυτα αναληθές, 2= Αρκετά αναληθές, 3 = Δεν μπορώ να πω αληθές ή αναληθές, 4 = Αρκετά αληθές, 5 = Απόλυτα αληθές 1. Τα παιδιά που συμπεριφέρονται ως λυπημένα συνήθως προσπαθούν να κάνουν τους ενήλικες να τα λυπηθούν. 2. Θέλω το παιδί μου να βιώσει το θυμό. 3. Όταν το παιδί μου είναι λυπημένο, καθόμαστε μαζί και συζητούμε σχετικά με τη λύπη του. 4. Τα παιδιά συχνά υποκρίνονται τα λυπημένα, ώστε να γίνεται το δικό τους. 5. Θέλω το παιδί μου να βιώσει τη λύπη. 6. Είναι σημαντικό να βοηθάω το παιδί μου να καταλάβει τι προκάλεσε το θυμό του/της. 7. Όταν το παιδί μου είναι θυμωμένο, δεν είμαι αρκετά σίγουρος/η τι θέλει να κάνω. 8. Όταν το παιδί μου είναι λυπημένο, προσπαθώ να το βοηθήσω να αναζητήσει αυτό που τον/τη στενοχωρεί. 9. Τα παιδιά έγουν το δικαίωμα να νιώθουν θυμό. 10. Δε με απασχολεί να αντιμετωπίσω τη λύπη ενός παιδιού, εφόσον αυτή δε διαρκεί πολύ. 11. Όταν το παιδί μου λυπάται, τον/την προειδοποιώ ώστε να μην αναπτύξει κακό γαρακτήρα. 12. Ο θυμός ενός παιδιού είναι σημαντικός. Όταν το παιδί μου θυμώνει, σκέφτομαι «Μακάρι αυτός/η να μπορούσε 13. απλά να προσαρμόζεται» Όταν το παιδί μου θυμώνει, στόχος μου είναι να τον/την κάνω να 14. σταματήσει. 15. Όταν το παιδί μου είναι λυπημένο, προσπαθώ να τον/τη βοηθήσω να καταλάβει γιατί νιώθει αυτό το συναίσθημα. 16. Πιστεύω ότι είναι καλό για τα παιδιά μερικές φορές να αισθάνονται θυμωμένα. 17. Όταν το παιδί μου είναι λυπημένο, δεν είμαι αρκετά σίγουρος/η για το τι θέλει να κάνω. 18. Όταν το παιδί μου θυμώνει μαζί μου, σκέφτομαι «Δε θέλω να το ακούσω αυτό». 19. Όταν το παιδί μου είναι θυμωμένο, είναι η ευκαιρία να λύσουμε κάποιο πρόβλημα. 20. Όταν το παιδί μου θυμώνει, σκέφτομαι «Γιατί δε μπορεί αυτός/ή να δεχτεί τα πράγματα όπως είναι».

Ερωτηματολόγιο Ψυχικής υγείας-σύντομη έκδοση (Mental Health Continuum SF Questionnaire)

Απαντήστε στις παρακάτω ερωτήσεις σχετικά με το πώς αισθάνεστε τον τελευταίο μήνα. Τοποθετήστε ένα σημάδι ελέγχου στη θέση που αντιπροσωπεύει καλύτερα πόσο συχνά έχετε βιώσει ή αισθάνεστε τα εξής:

| Κατά τη διάρκεια του περασμένου μήνα, πόσο συχνά αισθάνεστε | Πο τέ | Μια ή Δυο | Περίπου μια φορά την εβδομάδα | Περίπου 2 με 3 φορές την εβδομάδα | Σχεδόν κάθε μέρα | Κάθε μέρα |
|---|----------|-----------------|--|--|------------------------|--------------|
| 1)Χαρούμενος/η; | 1 | 2 | 3 | 4 | 5 | 6 |
| 2)Με ενδιαφέρον για τη ζωή; | 1 | 2 | 3 | 4 | 5 | 6 |
| 3)Ικανοποιημένος/η από τη ζωή; | 1 | 2 | 3 | 4 | 5 | 6 |
| 4)Ότι είχατε κάτι σημαντικό να συνεισφέρετε στην κοινωνία; | 1 | 2 | 3 | 4 | 5 | 6 |
| 5)Ότι ανήκατε σε μια κοινότητα (π.χ. μια κοινωνική ομάδα, τη γειτονιά σας); | 1 | 2 | 3 | 4 | 5 | 6 |
| 6)Ότι η κοινωνία μας είναι καλό μέρος ή γίνεται καλύτερο μέρος για όλους τους ανθρώπους; | 1 | 2 | 3 | 4 | 5 | 6 |
| 7) Ότι οι άνθρωποι είναι βασικά καλοί; | 1 | 2 | 3 | 4 | 5 | 6 |
| 8)Ότι ο τρόπος που λειτουργεί η κοινωνία έχει νόημα για εσάς; | 1 | 2 | 3 | 4 | 5 | 6 |
| 9)Ότι σας άρεσαν οι περισσότερες πτυχές της προσωπικότητάς σας; | 1 | 2 | 3 | 4 | 5 | 6 |
| 10)Ότι είστε καλός στη διαχείριση των ευθυνών της καθημερινής σας ζωής; | 1 | 2 | 3 | 4 | 5 | 6 |
| 11)Ότι είχατε σχέσεις ζεστασιάς κι εμπιστοσύνης με τους άλλους; | 1 | 2 | 3 | 4 | 5 | 6 |
| 12)Ότι είχατε εμπειρίες που σας έδιναν το έναυσμα να αναπτυχθείτε και να γίνετε καλύτερος άνθρωπος; | 1 | 2 | 3 | 4 | 5 | 6 |
| 13)Ότι είχατε την αυτοπεποίθηση να σκεφτείτε ή να εκφράσετε τις δικές σας ιδέες και απόψεις; | 1 | 2 | 3 | 4 | 5 | 6 |
| 14)Ότι η ζωή σας έχει μια αίσθηση κατεύθυνσης ή νοήματος μέσα της; | 1 | 2 | 3 | 4 | 5 | 6 |

Materials (English version)

Questionnaires (English version)

NICOMACHUS-Positive Parenting Questionnaire (NPP)

Below are twenty statements about you and your family, with which you may agree or disagree. Using the 1 - 5 scale below, indicate your agreement with each item by indicating that response for each statement.

- 1 = Absolutely Untrue, 2 = Mostly Untrue, 3 = Can't Say True or Untrue, 4 = Mostly True, 5 = Absolutely True
- 1) I encourage my child to keep his/her sense of humor even in hard times
- 2) I encourage my child to fight for what is fair
- 3) I incite my child to always tell the truth
- 4) I urge on my child to retry things, he/she wasn't successful in the past
- 5) I incite my child to be enthusiastic with everything he/she does
- 6) I urge my child on reading books
- 7) I encourage my child to do the right thing, even when there is no personal gain
- 8) I encourage my child to motivate and support others when he/she participates in group activities
- 9) I urge my child on giving a second chance to other people
- 10) I am in readiness to see into my child's strengths
- 11) Some of my child's strengths stand out more clearly than others
- 12) I can say I am sufficiently aware of my child's strengths
- 13) I encourage my child to study something related to his/her character strengths
- 14) I make sure that my child's extracurricular activities cultivate his/her character strengths
- 15) I do not have problems with my marriage or personal relationship
- 16) I have a good relationship with my extended family members
- 17) My husband/partner supports me when I need it
- 18) I help my child do his/her homework
- 19) I get my child to his/her extracurricular activities
- 20) I often get briefed by my child's teachers

Emotion-Related Parenting Styles Self-test-ERPS

This questionnaire asks questions about your feelings regarding sadness, fear and anger both in yourself and in your children. For each item, please circle the choice that best fits how you feel. If you are not sure, go with the answer that seems the closest.

| | Always false | | | | Always true |
|---|-----------------|---|---|---|----------------|
| 1. Children acting sad are usually just trying to get adults to feel sorry for them. | 1 | 2 | 3 | 4 | 5 |
| 2. I want my child to experience anger. | 1 | 2 | 3 | 4 | 5 |
| 3. When my child is sad, we sit down and talk over the sadness. | 1 | 2 | 3 | 4 | 5 |
| 4. Children often act sad to get their way. | 1 | 2 | 3 | 4 | 5 |
| 5. I want my child to experience sadness. | 1 | 2 | 3 | 4 | 5 |
| 6. It's important to help the child find out what caused the child's anger. | 1 | 2 | 3 | 4 | 5 |
| 7. When my child is angry, I'm not quite sure what he or she wants me to do. | 1 | 2 | 3 | 4 | 5 |
| 8. When my child is sad, I try to help the child explore what is making him or her sad. | 1 | 2 | 3 | 4 | 5 |
| 9. Children have a right to feel angry. | 1 | 2 | 3 | 4 | 5 |
| 10. I don't mind dealing with a child's sadness, so long as it doesn't last too long. | 1 | 2 | 3 | 4 | 5 |
| 11. When my child gets sad, I warn him or her about not developing a bad character. | 1 | 2 | 3 | 4 | 5 |
| 12. A child's anger is important. | 1 | 2 | 3 | 4 | 5 |
| 13. When my child gets angry, I think, "If only he or she could just learn to roll with the punches." | 1 | 2 | 3 | 4 | 5 |
| 14. When my child gets angry, my goal is to get him or her to stop. | 1 | 2 | 3 | 4 | 5 |
| 15. When my child is sad, I try to help him or her figure out why the feeling is there. | 1 | 2 | 3 | 4 | 5 |
| 16. I think it's good for kids to feel angry sometimes. | 1 | 2 | 3 | 4 | 5 |
| 17. When my child is sad, I'm not quite sure what he or she wants me to do. | 1 | 2 | 3 | 4 | 5 |
| 18. When my child gets angry with me, I think, "I don't want to hear this." | 1 | 2 | 3 | 4 | 5 |
| 19. When my child is angry, it's time to solve a problem. | 1 | 2 | 3 | 4 | 5 |
| 20. When my child gets angry, I think, "Why can't he or she | 1 | 2 | 3 | 4 | 5 |

Mental Health Continuum Short Form-SF Questionnaire

Please answer the following questions are about how you have been feeling during the past month. Place a check mark in the box that best represents how often you have experienced or felt the following:

| During the past month, how often did you feel | never | once or twice | about once a week | about 2 or 3 times a week | every day | every day |
|---|-------|------------------|-------------------------|---------------------------------|-----------|-----------|
| 1. happy | 1 | 2 | 3 | 4 | 5 | 6 |
| 2. interested in life | 1 | 2 | 3 | 4 | 5 | 6 |
| 3. satisfied with life | 1 | 2 | 3 | 4 | 5 | 6 |
| 4. that you had something important to contribute to society | 1 | 2 | 3 | 4 | 5 | 6 |
| 5. that you belonged to a community (like a social group, or your neighborhood) | . 1 | 2 | 3 | 4 | 5 | 6 |
| 6. that our society is a good place, or is becoming a better place, for all people | 1 | 2 | 3 | 4 | 5 | 6 |
| 7. that people are basically good | 1 | 2 | 3 | 4 | 5 | 6 |
| 8. that the way our society works makes sense to you | 1 | 2 | 3 | 4 | 5 | 6 |
| 9. that you liked most parts of your personality | 1 | 2 | 3 | 4 | 5 | 6 |
| 10. good at managing the responsibilities of your daily life | 1 | 2 | 3 | 4 | 5 | 6 |
| 11. that you had warm and trusting relationships with others | 1 | 2 | 3 | 4 | 5 | 6 |
| 12. that you had experiences that challenged you to grow and become a better person | 1 | 2 | 3 | 4 | 5 | 6 |
| 13. confident to think or express your own ideas and opinions | 1 | 2 | 3 | 4 | 5 | 6 |
| 14. that your life has a sense of direction or meaning to it | 1 | 2 | 3 | 4 | 5 | 6 |