

Parental Stress and Coping Strategies in Parents of an Educational Institution in Times of COVID-19

Lisbeth Beatriz Chanduvi Huamán¹, Lizzeth A. García-Flores², Sara Esther Liza Ordoñez³, Yen M. Bravo Larre⁴, Ronald M. Hernández⁵

¹Universidad Nacional Pedro Ruiz Gallo, Lambayeque, Perú <http://orcid.org/0000-0003-3222-2364> Email: lisbeth_1990@hotmail.com

²Universidad César Vallejo, Chiclayo, Perú <https://orcid.org/0000-0002-1975-2582> Email: lizzethagf@hotmail.com

³I.E. 10042-Monseñor Juan Tomis Stack, Chiclayo, Perú <https://orcid.org/0000-0003-4359-7989> Email: saritaliza681@gmail.com

⁴Universidad Privada del Norte, Lima, Perú. <https://orcid.org/0000-0003-3768-2941>. Email: yen.bravo@upn.edu.pe

⁵Universidad Continental, Lima, Perú. <https://orcid.org/0000-0003-1263-2454>. Email: ronald.hernandez@outlook.com.pe

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ABSTRACT

As a consequence of the COVID-2019 pandemic, parents had to adapt to a new way of life, facing different stressors through the use of coping strategies. The aim of the study was to establish the relationship between parental stress and coping strategies in parents of an educational institution in the district of Cartavio, Peru. The research was descriptive-correlational, non-experimental cross-sectional design, with a sample of 108 parents, using the Parental Stress questionnaire, in its reduced version and adapted to the Peruvian context, and the Stress Coping Estimation Inventory (COPE). The results indicate a positive relationship between parental stress and the strategy of behavioral disengagement; parental stress levels belonged mostly to the medium category with 67.5%; the predominant stress coping strategies were active coping and positive reinterpretation - personal development, both with 18.5%. It is concluded that there is a relationship between the parental stress strategy and behavioral disengagement.

1. Introduction

Severe acute respiratory syndrome 2 (COVID-19) has spread in various parts of the world, causing indisputable changes in almost all aspects of life, exposing parents to greater risk of emotional exhaustion in the face of the challenges they must assume in their role as parents (Griffith, 2020), directly affecting their coping resources and experiencing parental stress, potentiated by measures that seek to mitigate the spread of the virus, such as the change of routine, limitation of family contact and restriction of recreational centers, which would cause erosion of family ties and even problems in parenting. Likewise, the increase in unemployment has led to parents having little possibility of acquiring basic necessities that are scarce or more expensive as a result of the pandemic (World Labor Organization, 2020). In addition, remote education and its adaptation process produced anxiety in parents when organizing their children's education, taking into account the limited technological knowledge, scarce electronic devices and problems and interruptions that the system may experience (American Psychological Association, 2020). During the last year, different psychosocial sequelae have appeared as a result of COVID 19, the family situation, the parental burden have still received few studies. The general stress suffered by the caregiver has been related to illnesses such as anxiety and depression (Calvano et al., 2022). The pandemic as a global effect has shown that perceived parental impact is associated with stress and risk of severe parenting (Brown et al., 2020; Chung et al. 2020) and is not only associated with infected families, those who were not exposed to the contagion are likely to experience indirect mental health effects of pandemic confinement (Van Bavel et al., 2020). Stress is known to impair family functioning, child psychosocial development, and caregiver mental health (Crnic and Coburn, 2019).

According to Crnic et al., (2005), it states that parental stressors can be classified as major events associated with routine hassles (childcare and educational demands), these being the most specific and most powerfully influencing children, parents and the family situation. And it is where the cumulative impact of these stresses associated with the crises could be categorized as a major crisis in family and public health during and after the COVID-19 pandemic. This condition is evidenced in different countries, for example, in the United States and Pennsylvania, parents are facing high standards of stress as a consequence of the sanitary emergency, and similar cases are observed in Latinoamérica (La Opinión A Coruña, 2020) and Peru, where 52% of citizens deal with family conflicts associated with emotional problems, arguments or depression, presenting a risk situation in the short or long term and increasing the probability of child abuse and abandonment (Radio Programas del Perú, 2020);

Therefore, in some places, emotional support was provided through telephone lines to families in quarantine who manifested symptoms of anxiety, with the purpose of balancing the mental health of individuals, minimizing the negative repercussions of confinement and helping parents in the use of strategies that function as cognitive, emotional and behavioral stress mitigating efforts (Andina, 2020). These strategies can attend to the conflict, based on the problem and its ways to solve it, as well as focus on emotion and mood regulation; lastly and less advisable they can be oriented to the avoidance or minimization of the stressor, turning the person into a passive actor, Lazarus and Folkman (as cited in Polanco, 2019).

For this reason, it is important to evaluate how parents cope with stress and what coping strategies they use; Therefore, in a dialogue with the principal of an educational institution in the district of Cartavio, La Libertad, referred that parents of second grade elementary school "have difficulties with virtual classes, parental responsibility for more than one child, performing household chores and support in school work, remote work, loss of a close relative, debts, marital separations; among others"; causing fatigue and emotional exhaustion in them. The contribution of this research to the knowledge of the educational institution and the scientific community is important, and from there, to design intervention programs with a cognitive behavioral approach, used in the management of stress-related problems, thus seeking to modify negative thoughts, feelings and behaviors in the short term, which have an impact in favor of the study population (Cacay, 2021), especially at present when there is a great need to investigate parental stress in times of pandemic, which according to the background shown has been increasing. Therefore, the objective of this study is to establish the relationship between parental stress and coping strategies in parents. In consideration of the antecedents, we take into account the study of Moreira (2021) who analyzed the socioeconomic changes in the families of Guayaquil during the SARS-COV-2 pandemic, finding in the parents very high stress; being the most used strategies, problem solving, desiderative thinking and social withdrawal; on the other hand, Melero et al. (2021) during the covid-19 pandemic, found that parental stress was associated with lower use of the strategy of emotional regulation, cognitive reappraisal and prominent use of the expressive suppression strategy, consisting of poor externalization of feelings and emotions, mainly the primary ones, such as anger, sadness, anguish, fear.

Likewise, in Peru, the relationship between Covid19 and emotional stress was studied in parents of an initial educational institution in Azángaro, where 42.2% of the population presented high stress, 26.6% moderate stress and 18% low and very low stress; likewise, it was determined that 24.44% of the parents who exhibited moderate stress stated that they had problems with their children's academic activities (León, 2021). Another study in Peru sought to determine the influence of stress and parental behavior of parents with children aged 3 to 5 years in a pandemic situation, with a population of 88 parents (76.1%, mothers), finding high stress in the dimensions, affecting communication, support, bonding behaviors, attention, good treatment, appropriate parenting patterns and affection of parents towards their children, and concluded that parents were satisfied with their role as such, presenting low levels of stress (Carillo, 2021). Similar data were extracted from the research of Tacca, Alva and Chire (2020), when analyzing the relationship between parental stress and the attitudes of 104 single mothers towards their relationship with their children, in the city of Lima, they indicated that the higher the stress in the parents, the lower the support towards the children, affecting satisfaction, commitment, communication and parental autonomy. Regarding the dimensions of the stress variable, the highest score was found in the parental discomfort scale (48%), followed by the difficult child scale (38%) and the dysfunctional parent-child interaction scale (34%).

In the same line of research on parental stress, the study, depressive symptomatology, stress and family functioning in Mexican adult mothers, found that 21.2% of the parents showed high stress, and 78.8% low stress level, Gaytán, et al. (2019). Similarly, in Huancayo, parental stress was investigated in mothers of children using the growth and development control service at the Chilca Health Center, where 71.4% of participants showed parental stress. Regarding the dysfunctional parent-child dimension, 91.7% exhibited high levels of stress, followed by difficult child (47%) and parental

discomfort (45.6%) (Arotoma, 2019). In contrast, in the study of parental stress in mothers and fathers attending the Vida y Bienestar psychological clinic in the district of Pueblo Libre; it was determined that, of 50 participants, 48% of them evidenced low stress level, 46% very low stress level and 6% average stress level, concluding that most parents made an adequate management of their emotions (Vargas, 2019). As for high levels of stress, negative opinions, devaluation and intransigent judgments of parents towards their children stand out, in addition to lower demonstrations of affection, communication and inductive demand for compliance with rules; this is indicated by Salazar (2019) in his study parental stress and parenting practices in parents of families in Metropolitan Lima. Similarly, high stress has a negative impact on the emotional, behavioral and cognitive state of the child, bringing school and social problems, as described in the research, parental stress and the emotions of 3-year-old children (Aro, 2019). Finally, regarding coping research, Esquerre (2019), in his study, coping with stress among parents of children with and without special educational needs in Florencia de Mora, in La Libertad, determined that parents with children without special educational needs, used the problem-solving strategy to a greater extent (41%).

2. Methodology

Type and design of research

The approach is quantitative, because the information obtained was processed through numerical measurement and statistical analysis; likewise, it is descriptive-correlational, with a non-experimental cross-sectional design, since there was no manipulation of variables and data collection was carried out at a single moment, to finally describe them and establish links. Likewise, the nature of the study is deductive, starting from general data to specific data (Hernández, Fernández & Baptista, 2014).

Sample

The sample consisted of 108 primary school parents from a public school located in the Cartavio district of the La Libertad region in Peru. The inclusion criteria taken into account were parents whose children were enrolled in the 2020 school year and those who had filled out the informed consent form. The exclusion criteria were parents who did not live with their children. And the elimination criterion was parents who had not completed the instruments correctly. The technique used to collect information, ideas, judgments and attitudes of parents was the survey, conducted through the online platform Google Forms.

Instruments

The Parental Stress Questionnaire, by Richard R. Abidin (1995) of the University of Virginia, was applied in its reduced version adapted by Gracia Sánchez - Griñán (2015), which exhibits 24 items and three dimensions: parental distress (items 1 to 7), dysfunctional interaction (items 8 to 13) and difficult child (items 14 to 24). The scores are presented on a Likert-type scale, where the option "strongly agree" is rated five points, followed by "agree" with four points, "not sure" with three points, "disagree" with two points and "strongly disagree" with one point. It is worth noting the existence of a scale (items 25 to 43) that allows us to obtain information on stressful events experienced by parents during the last year, such as divorce, reconciliation with a partner, marriage, pregnancy, judicial problems, death of a close family member, among others. The answers in this section are dichotomous (true or false) and are interpreted qualitatively and individually (Nanfuñay, 2020). The evaluation time is approximately 15 to 20 minutes. Regarding the psychometric properties, the reliability of the instrument, presents an internal consistency coefficient of .89, with a standard error of measurement of 4.04; (Sanchez, as cited in Nanfuñay, 2021). Likewise, the three dimensions, Parental Distress, Dysfunctional Parent-Child Interaction and Difficult Child present an internal consistency coefficient of .84; .77 and .87 respectively. In addition, high levels of reliability were identified, both in the general test and in each dimension, exceeding the minimum accepted value of .70. The content validity was supported by the internal structure, using exploratory factor analysis, with adequate factor loadings greater than 0.30 (Sanchez, 2015). As a second instrument, the Stress Coping Coping Estimation Inventory (COPE) was used, which evaluates the ways in which humans usually react to stress, Carver (as cited in Teuracán

and Treimún, 2016). It presents 52 items divided into 3 styles (13 strategies). The Problem-focused coping style, is conformed by the active coping strategy, with items 1,14,27 and 40; search for social support for instrumental reasons with items 5,18,31,44; suppression of competent activities with items 3,16,29,42; postponement of coping with items 4,17,30,43; planning with items 2,15,28,41. The emotion-focused coping style, composed of the styles, seeking social support for emotional reasons, with items 6,19,32,45; acceptance with items 8,21,34,47; turning to religion with items 9,22,35,48; positive reinterpretation and personal development with items 7,20,33,46; denial with items 11,24,37,50. The avoidant style, constituted by the styles focusing and releasing emotions with items 10,23,36,49; behavioral disengagement with items 12,25,38,51 and mental disengagement with items 13,26,39,52. It contains a five-point rating scale of 4 Likert-type scales where; 1 = I almost never do that, 2 = I sometimes do that, 3 = I usually do that, 4 = I almost always do that. The evaluation time is approximately 15 to 20 minutes. As for its psychometric properties, validity was found 13 factors with eigenvalues greater than 1.1. Likewise, reliability, was found through Cronbach's internal coefficient with a range of 0.45 to 0.92, whose cognitive disengagement scale obtained a coefficient of less than 0.60 (Casaretto & Chau, 2016).

Data analysis

In order to identify whether the data conform to a normal distribution, the Shapiro-Wilk test was used, which was chosen because of its advantages over the Kolmogorov-Smirnov test. Traditionally, when there are more than 50 data, the Kolmogorov-Smirnov test is used; however, recent research has identified that this test tends to overestimate the results of normality, and the Shapiro-Wilk test is currently recommended. Thus, it was found that the data do not fit a normal distribution, so it was decided to use Spearman's rho nonparametric test in order to identify the relationship between the variables.

Ethical criteria

The principle of autonomy was specified by sending informed consent, as well as the objectives of the research, purposes, instruments to be used and how the results would be used. Likewise, the confidentiality and voluntariness of the participants was maintained and they were informed that they could send their queries or doubts by telephone calls, WhatsApp messages or text messages; they were also informed that they could request the results of their evaluations, in order to comply with the principle of beneficence. Finally, it should be noted that the research does not represent any physical or psychological risk to the population.

3. Results and discussion

There is evidence of a positive relationship between parental stress and behavioral disengagement strategy (Table 1).

Table 1. Parental stress and coping strategies

Coping strategies	Parental stress	
	Spearman's rho	p-value
Active Coping	-0.063	0.52
Planning	0.092	0.341
Suppression of competent activities	0.092	0.344
Postponement of coping	0.036	0.71
Seeking social support for instrumental reasons	0.012	0.9
Seeking social support for emotional reasons	-0.042	0.668
Positive reinterpretation and personal development	-0.103	0.287
Acceptance	0.148	0.126
Religion	0.043	0.657
Denial	-0.005	0.957
Focusing and releasing emotions	0.125	0.197
Behavioral disengagement	0.331	< .001

Mental disengagement	-0.01	0.921
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Regarding the categorization of the levels, it was found that the medium-high levels of parental stress presented a percentage of 84.1%, indicating that the participants perceive the demands of their parental role as exceeding their personal resources (Table 2).

Table 1. Level of parental stress

Parental stress	F	%
High	18	16.6
Medium	73	67.5
Under	17	15.7
Total	108	100

Positive reinterpretation and personal development and active coping are identified (18.5 %), followed by the planning strategy (16.7 %) (Table 3).

Table 2. Predominant coping strategies

Coping strategies	F	%
Acceptance	8	7.4
Active Coping	20	18.5
Seeking social support for instrumental reasons	2	1.9
Focusing and releasing emotions	5	4.6
Planning	18	16.7
Positive reinterpretation and personal development	20	18.5
Total	108	100

A positive relationship was found between behavioral disengagement strategies and postponement of coping with parental stress (Table 4).

Table 3. Parental distress dimension of parental stress and coping strategies

Coping strategies	Parental distress dimension of stress	
	Spearman's rho	p-value
Active Coping	-0.103	0.29
Planning	0.064	0.514
Suppression of competent activities	0.073	0.452
Postponement of coping	0.206	0.033
Seeking social support for instrumental reasons	0.114	0.24
Seeking social support for emotional reasons	0.074	0.445
Positive reinterpretation and personal development	-0.047	0.63
Acceptance	0.144	0.138
Religion	0.06	0.535
Denial	0.138	0.156
Focusing and releasing emotions	0.05	0.607
Behavioral disengagement	0.284	0.003
Mental disengagement	0.082	0.397

Regarding the relationship between the dysfunctional parent-child interaction dimension of parental stress and coping strategies, only the behavioral disengagement strategy and parental stress were found to be positively related (Table 5).

Table 4. Dysfunctional parent-child interaction dimension of parental stress and coping strategies

Coping strategies	Dysfunctional Parent-Child Stress Interaction Dimension	
	Spearman's rho	p-value
Active Coping	-0.021	0.826

Planning	0.078	0.423
Suppression of competent activities	0.148	0.126
Postponement of coping	0.086	0.377
Seeking social support for instrumental reasons	0.048	0.624
Seeking social support for emotional reasons	0.03	0.757
Positive reinterpretation and personal development	-0.062	0.526
Acceptance	0.188	0.052
Religion	0.12	0.214
Denial...	0.015	0.877
Focusing and releasing emotions	0.107	0.27
Behavioral disengagement	0.293	0.002
Mental disengagement	0.037	0.705

Regarding the relationship between the difficult child dimension of parental stress and coping strategies, a positive relationship was found with the strategy of behavioral disengagement (Table 6).

Table 5. Difficult child dimension of parental stress and coping strategies

Coping strategies	Difficult Child Stress Dimension	
	<i>Spearman's rho</i>	<i>p-value</i>
Active Coping	-0.069	0.477
Planning	0.072	0.458
Suppression of competent activities	0.001	0.988
Postponement of coping	-0.111	0.255
Seeking social support for instrumental reasons	-0.054	0.581
Seeking social support for emotional reasons	-0.115	0.237
Positive reinterpretation and personal development	-0.138	0.154
Acceptance	0.04	0.684
Religion	0.016	0.87
Denial	-0.127	0.189
Focusing and releasing emotions	0.13	0.181
Behavioral disengagement	0.24	0.012
Mental disengagement	-0.079	0.415

In Peru, on March 5, 2020, the first clinical report of Covid-19 was released, causing alarm among the population (Pan American Health Organization, 2021), and ten days later, confinement was declared, causing uncertainty and confusion, forcing parents to adapt to a new way of life, facing various stressors and seeking individual coping strategies in order to reduce or eliminate the conflict. For the general objective, there is evidence of a positive relationship between parental stress and the behavioral disengagement strategy, indicating that parents who desist from making an effort to deal with the conflict present higher levels of stress, adopting passive attitudes and condescending when reaching a consensus with their children, This is corroborated by Moreira (2021), who emphasized that as a result of the health emergency, parents who exhibited stress used as predominant strategies, desiderative thinking and social withdrawal, characterized by inadequate problem management, avoidance, fantasies about better realities, isolation and self-criticism. This is evidence that, on occasions, parents prefer not to face reality and avoid it, ignoring their children's behaviors, not focusing on the problem and postponing attention to the conflict; This is supported by the study of Melero, et al (2021) in Spain, who identified that parents who perceived parental stress from the fiftieth day of social isolation, used as coping strategies affective suppression, consisting in the poor externalization of feelings and emotions, mainly the primary ones, such as anger, sadness, anguish and fear, leading parents to avoid thinking about the conflict situation by ineffectively using the strategy of emotional regulation, which has the function of protecting the mental health of the individual; In this sense and when analyzing these results, the findings of the present research are confirmed even though the name of the strategies vary, because a different instrument was used (Emotional Regulation Strategies-ERQ); therefore, the strategy of behavioral disengagement (COPE) and affective suppression are related since both are distinguished by avoiding the problem and behaving as if it did not exist, thus increasing stress. These

results are consistent with previous literature, mentioning that parents who use avoidant and passive strategies, such as behavioral and emotional disengagement and emotional release, show high levels of stress, anxiety and depression, Hastings and Johnson (as cited in Miskulin, 2019).

From the above and in accordance with the first specific objective, it is found that 16.6% of the participants obtained high stress and 67.5% medium stress. 5 % medium stress, indicating that parents with high levels of stress are going through situations that limit their parental functions, such as fear of contagion of COVID-19, sharing work and family schedules, economic difficulties, job terminations, human losses, inappropriate behaviors of the children, respiratory diseases, support in children's school work, limited access to internet, restriction of recreational areas and even reduced spaces of overcrowding, among others; these data agree with the study of León (2021) where 42.2% of the participants presented high stress and 26.6% moderate stress, and 24.44% of the parents who exhibited moderate stress reported having problems with their children's school work; Moreira (2021), in the city of Guayaquil, found high and very high levels of stress in parents. Both results support the knowledge obtained in this research and coincide in that they were obtained in the years 2020 and 2021, in the midst of the health emergency, which has been accompanied by confusion, uncertainty, fear and pain, not to mention the limitations and restrictions provided by the authorities. In contrast are the results of Gaytán et al (2019), who found that 78% of the participants in their study obtained low levels of stress; as did Vargas (2019) whose population manifested low and very low stress in 90%. In the first case, parents were evaluated in a psychological clinic and in the second, only adult mothers were part of the study; it is assumed then, that the discrepancy can be explained by the personal characteristics and different realities of the study population, taking into consideration what was postulated by Morrison and Bennett (2008) when proposing that personality influences the perception of greater or lesser degree of stress; also that the data collection was carried out in 2019, when the WHO had not yet declared a pandemic. Due to the above described and in the midst of the situation, parents could be experiencing feelings such as helplessness, frustration, discouragement, anguish and guilt, affecting their mood and disfavoring the emotions of their children, being condescending with them or, on the contrary, intransigent, resulting in rigid practices, less care and little commitment, Sanchez (as cited in Nanfuñay, 2021), as well as Melero (2021) in his research, where he found that parental stress functioned as a predictor of alterations in the child's cognition, sleep, feeding and behavior; This coincides with Carrillo (2021), who refers that the higher the levels of stress in the parental dimensions, the greater the possibility that communication, support and bonding behaviors will be affected, i.e., the higher the stress in the parents, the lower the parental satisfaction and autonomy.

Regarding the second specific objective, it is found that active coping and positive reinterpretation-personal development; are presented with the same frequency (18.5 %), followed by the planning strategy (16.7%); all of them belong to the coping styles focused on the problem and emotion, characterized by focusing on the conflict and the way to solve it, as well as on the regulation of emotions arising from the problematic situation; that is to say that those parents who used the active coping strategy have a greater predisposition and willingness to resolve conflicts, directing their actions and efforts to attenuate or eliminate the stressor, impacting efficiently on resilience, as supported by Melero et al (2021) highlighting in their research that parents who used cognitive reappraisal, based on the positive reinterpretation of the conflict, showed greater parental complacency, taking social isolation and quarantine as an opportunity to offer time to the family, support in school activities and rest. On the other hand, those who use the positive reinterpretation strategy seek to strengthen an effective reality by focusing on the positive side of the problem; in addition, those who used the activity planning strategy, made decisions and resolved conflicts in a systematic, methodological and orderly manner (Gonzales. 2020). This supports what was proposed by Orbegoso (2019), who indicates that the use of these coping modes is related to personal esteem, well-being, comfort and effective response to frustration, so it is likely that parents who made use of these strategies possess greater coping skills, organize their work and family schedules, share tasks at home, adequately manage finances and take safety and personal care precautions. Likewise, Esquerre (2019) in his analysis, determined that parents

with children without learning difficulties, used to a greater extent the problem-solving strategy (41%), which is aimed at seeking alternative solutions to minimize the effects of the stressor. This strategy, which belongs to the Moos Coping Response Inventory CRI-A, is related to the active coping strategy (COPE Inventory), since both are dynamic and work with the aim of overcoming the conflict.

Concerning the third objective, a relationship was found between the dimension of parental discomfort and the strategies of behavioral disengagement and postponement of coping, revealing that the participants who do not feel satisfied with the development of their role as parents, exhibit behaviors that disengage them from the problem, acting as if it did not exist or waiting for the right moment to face it, obtaining in the best of cases, short-lived results. Likewise, the changes experienced by parents are highlighted, starting from the birth of their children, with their cognitions being restructured regarding the way they perceive life, to the point of assuming responsibilities that transcend their own existence. The aforementioned is corroborated by Mossop (2013) when he points out that, after the arrival of parenthood, there is a neuronal renewal with cellular tissues and synaptic connections; therefore, a psychic reorganization is generated, that is, a set of desires, mistrust and illusions related to childbirth. Likewise, aspects such as personality, guilt, difficulty in making correct decisions, beliefs and self-concepts are involved, which would lead parents to the use of critical and rejecting parenting guidelines (Salazar, 2019), adding factors such as social isolation, which limited the physical approach between people, the closure of establishments and restrictions that involved spending more time at home, even under conditions conducive to stress. It should be noted that there is a scarcity of studies with these variables; however, regarding the parental distress dimension and the use of the strategies behavioral disengagement and postponement of coping, it is indicated that parents who exhibit a deteriorated sense of parental competence do not feel satisfied with their performance as parents, possibly due to their personal characteristics, self-esteem, resilience or insufficient commitment, which results in little effort to solve the problems related to parenting, or waiting to find the right time to address the conflict; For all these reasons, Carrillo (2021) in his research expresses that parental discomfort fosters, although weakly, behaviors of hostility and cohesion, lack of support, affection and dialogue of parents with their children. Likewise, the relationship between the difficult child dimension and the strategy of behavioral disengagement reveals that parents neglect their guiding and moderating role over their children's behavior, predicting any effort as futile, in this sense, Matos (2020) mentions that this strategy is present when parents distrust their ability to solve problems, so that they flee from difficult or painful situations; On the other hand, the way of handling parenthood is related to the perception of the behavior of the children, for whom the health emergency has been difficult to cope with, to the point that in some places cases of inattention, hyperactivity, irritability, anguish, hyperventilation, diarrhea, sadness, feeling of abandonment, behavioral problems, sleep and appetite disturbances have been identified, which directly affects the family (Sanchez, 2021). As for the relationship between the dysfunctional parent-child interaction dimension and the behavioral disengagement strategy, it can be seen that child-parent bonds are affected, as well as empathy, patience, understanding, generosity, condescension and affection; From another perspective, the disillusionment of the parents in the face of their broken hopes in what they thought would be their life as parents, plays a very important role in their development, because the behavior of the children is not always as expected, as well as their way of being or behaving; therefore, in these circumstances the parents would behaviorally disengage, not being willing to look for alternative solutions to the conflict. In short, the pandemic has constituted a complex process in family life, where parents have been submerged in stress-generating situations, leading them to seek coping strategies that would allow them to face the problem to a lesser or greater extent, depending on their personal, instrumental and material resources, the relationship they had with their children, their children's characteristics and their conformity with respect to their parental roles. It is important that mental health professionals continue to understand and promote caregivers as the family support that children need so that they can develop more active coping strategies. This research offers some practical implications, as it presents the psychological dimensions analyzed and relevant to working with families. The results delve into the different coping strategies that caregivers offer according to their particular needs, offering clues for

clinical and psychosocial interventions, strengthening family protective factors.

4. Conclusion and future scope

It is concluded that there is a positive relationship between the parental stress strategy and behavioral disengagement. The predominant stress coping strategies were active coping and positive reinterpretation - personal development, both with 18.5%. Parental stress levels belonged to the medium category with 67.5%. A positive relationship was found between the dimensions: parental discomfort of parental stress, dysfunctional parent-child interaction and difficult child, with the coping strategy behavioral disengagement, and a relationship was also found between the parental discomfort dimension of parental stress and the procrastination strategy. It is essential to continue with the investigation of these variables, especially in a context in which it has been emerging from the confinement resulting from the pandemic of COVID-19, this type of future studies should focus on the development of pilot programs promoting the mental and emotional health of parents, both in the current context as well as in the future, with the aim of providing the necessary tools to strengthen protection against various situations that break the family tranquility.

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