Evaluating The Feasibility and Acceptability of The Family Check-Up Online with Chinese American Families: A Mixed-Methods Pilot Study

by:

Yijun Cheng

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Dissertation Committee:

Elizabeth Stormshak, Chair

Jen Doty, Core Member

David DeGarmo, Core Member

Sara Schmitt, Institutional Representative

University of Oregon

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DISSERTATION ABSTRACT

Yijun Cheng

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Title: Evaluating the Feasibility and Acceptability of the Family Check-Up Online with Chinese American Families: A Mixed-Methods Pilot Study

Introduction. Currently, approximately 5.5 million Asians of Chinese descent currently reside in the United States, making up 22% of the Asian population (Pew Research Center, 2025). Chinese American parents may face a range of parenting challenges, such as balancing between maintaining traditional Chinese values and incorporating Western parenting beliefs. To date, few studies have attempted to address the unique barriers Chinese American families face in everyday life. The Family Check-Up Online (FCUO), adapted from the original Family Check-Up (FCU) model and the Everyday Parenting curriculum, includes modules on positive parenting, rules and consequence, communication, healthy behaviors for stressful time, and support school success (Stormshak et al., 2019). The present study examined the feasibility and acceptability of the Family Check-Up Online (FCUO) for Chinese American families.

Methods. Guided by Bowen's (2009) feasibility framework, this parallel convergent mixed-methods study examined the acceptability and feasibility of the FCUO for Chinese American families and explored service needs and possible areas for cultural adaptation. Participants were first-generation Chinese American parents in the United States with children ages 8 to 14. Of the 28 parents screened for eligibility, 22 consented to participate and 17 completed the study. Parents completed pre- and post-intervention questionnaires, used the FCUO app, attended coaching sessions, and took part in post-intervention focus groups or individual interviews.

Results. The findings suggested that the FCUO was both feasible and acceptable for this sample group. Quantitative and qualitative data indicated improvements in parenting self-efficacy and parent-child relationship. Parenting behaviors, including positive parenting, limit setting, and communication, also changed in a positive direction, although not all changes reached statistical significance. Participants reported high satisfaction with the program and emphasized the usefulness of the multimedia format, coaching support, and the sense of parental validation it provided. At the same time, the findings identified several areas for adaptation, including Chinese-language delivery, expanding content on emotion competence, acculturation-related stress, parental self-care, and co-parenting challenges, as well as improving cultural fit for specific strategies such as praise and ignoring. Overall, the study provides preliminary support for the feasibility and acceptability of the FCUO for Chinese American families, while indicating that both surface- and deep-structure cultural adaptations are needed before larger-scale trials.

Keywords: Family Check-Up Online; Chinese American families; parenting intervention; cultural adaptation

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CHAPTER 1

INTRODUCTION

Culture influences how individuals think, behave, and relate to others across the lifespan (Heiphetz & Oishi, 2022). From early childhood, cultural values, beliefs, and social expectations guide how children are raised, how emotions are expressed, and what behaviors are considered appropriate. Cultural practices shape parenting styles, communication patterns, and family relationships, which in turn influence children's social, emotional, and cognitive development. At a broader level, culture shapes how individuals interpret their experiences and understand their roles within families and communities (Ahmed, 2024; Bornstein, 2013).

Culture and Parenting

Culture shapes parenting by influencing parents' beliefs about childrearing, their expectations for children's behavior, and the strategies they use to guide and discipline their children. Parents' beliefs, goals, and practices are therefore embedded within their cultural background. At the same time, parenting functions as a means of carrying and passing cultural values across generations. Studies have shown that parents develop beliefs and strategies through a cultural lens, and, in turn maintain and reproduce culture by applying these learned strategies to their children (Bornstein, 2010).

Parenting Beliefs

Culture plays a pivotal role in shaping parenting beliefs across various aspects of child-rearing. Parents' knowledge, values, and attitudes about parenting together constitute their parenting beliefs (September et al., 2016). These beliefs serve multiple purposes, including guiding parenting behaviors, shaping parenting goals, and influencing how well particular parenting practices are seen as fitting those goals. In this way, culture helps shape children's

development by influencing parents' beliefs about parenting and their attributions regarding children's developmental abilities, which in turn guide parental behavior (Bornstein, 2013; Cole, 2005). Parents from different cultural backgrounds hold distinct beliefs about parenting (Bornstein, 2001a; Lin et al., 2023). Among the myriad factors influencing parenting practices, culturally defined parenting beliefs often play a more significant role than the information parents acquire through observation.

Most recent research continues to suggest that Western and East Asian beliefs about learning are shaped by different intellectual traditions, in which contemporary researchers often describe this contrast as *mind-orientated* versus *virtue-oriented* learning (Li & Yamamoto, 2020; Liu et al., 2022). Influenced by Socratic principles, Westerners tend to view that knowledge is gained primarily to understand the world, develop one's skills, and accomplish one's goals (Langen & Roßnagel, 2023). In East Asian countries in which Confucian teachings have been historically central and continue to be influential through long established traditions, learning is a lifelong process of self-improvement, and this effort for perfection is regarded as a moral effort. Learning in an academic context is considered to be particularly important because it involves continuous self-improvement efforts when facing challenges (Schenck & Zhang, 2025).

Research in the past two decades has shown that East Asian and American parents differ along several dimensions in terms of their beliefs about their children's learning. In terms of academic success, Hsin and Xie (2014) found that East Asian parents are more likely to believe that academic success is mainly achieved through hard work ('*effort-based'*), whereas American parents are more likely to believe success depends on inborn intelligence ('*ability-based'*). For school readiness, Puccioni (2015) found that Western parents prioritize social skills; however, Chinese parents value academic and learning-related skills, such as attention and following

directions which emphasize on endurance and disciplined effort.

Parenting Goals

A primary goal of parenting is to facilitate children's adaptation to society and enable them to become culturally competent members of their community (Bornstein, 2012). Parenting goals and behaviors are shaped by cultural norms and are guided by expectations of adult behaviors valued within a particular society (Johnson et al., 2013). Research indicates that parents in Western cultures often use suggestions and other autonomy-supportive language to shape children's behaviors (Breiner et al., 2024; McCurdy et al., 2020). Parents with a Western cultural background, typically from North America and European countries, prioritize autonomy as one of the foremost parenting goals and tend to emphasize their children's self-assertiveness, self-reliance, and individual achievement. To cultivate such qualities in their children, parents encourage children to differentiate themselves from others, offer frequent praise, prioritize verbal feedback, and foster independent behaviors by encouraging critical and individual thinking, questioning authority, making decisions based on their own interests and abilities, and taking responsibility for their actions. This parenting approach emphasizes nurturing children's autonomy to prepare them for achieving individual success in adulthood (Lansford, 2022; Prevoo & Tamis-LeMonda, 2017).

In contrast, parents from Eastern cultures are more likely to use directive commands and physical reinforcement in parenting, reflecting a stronger emphasis on obedience and respect for authority. Compared with Western parenting goals that often value autonomy, Asian parenting approaches tend to place greater emphasize on children’s interdependence, collective achievement, and collaboration (He et al., 2021; Cheah et al., 2013). Such parenting behaviors have often been understood as adaptive in earlier rural farming ecologies, where family survivals

were depended on shared labor, close coordination, and mutual responsibility (Lansford, 2022; Lew-Levy et al., 2022). In these contexts, children were encouraged to prioritize family and community needs, participate in collaborative activities, and respect authority (Chen et al., 2019).

A recent study revealed that the expression and impact of parental autonomy vary significantly by cultural context, particularly when distinguishing between the *promotion of independence* (PI) and the *promotion of volitional functioning* (PVF). Higher levels of PI, manifested as independent decision-making, are associated with positive self-concept and school-related competence among European American adolescents. However, PI is not linked to academic performance for Asian American youth. Instead, autonomy is often viewed as "interdependent independence" in Asian American group, where these adolescents feel autonomous by voluntarily accepting parental advice. While PI shows some cultural variability, PVF (the promotion of self-endorsed action) appears to be universally beneficial to all groups (Benito-Gomez et al., 2020).

Parenting Practices

Parenting practices involve a variety of ways by which parents teach, influence, shape, and monitor their children's behaviors in their everyday interaction. Parents use specific skills to teach their values and achieve parenting goals. While parenting practices may vary across different stages of growth and situations, parenting practices are dominated by parenting beliefs, which are deeply rooted in the culture where parents grow up and reside. Research suggests that warmth, behavioral control, and psychological control are three parenting dimensions found across cultural groups (Barber, 1996; Rothenberg et al., 2020; Deater-Deckard et al., 2011).

Parental Warmth. Warmth refers to parents' general tendencies to be supportive, affectionate, and sensitive to their children's needs and is considered a 'universal' parenting style. Research showed that parental warmth is associated with positive outcomes regardless of culture (Pastorelli et al., 2021; Rothenberg et al., 2020). Yet, the expression of parental warmth could differ between cultures. Parental warmth is more often expressed directly through positive verbal and nonverbal affectionate communication in Western cultures, while in Eastern cultures, such expressions are more implicit through supportive behaviors such as helping with specific tasks (Vu et al., 2018; Cheah et al., 2015).

Behavioral Control. Behavioral control refers to parents' supervision, monitoring, and regulation of children's behavior. Recent research suggests that, when distinguished from psychological control, behavioral control is associated with better psychological adjustment and lower risk behaviors, but its links with academic and emotional outcomes vary across cultural settings and developmental domains (Rothenberg et al., 2020; Seo et al., 2025). Behavioral control is achieved through rules, regulations, restrictions and consequences. Confucius view of parenting holds that parents are obligated to apply certain control over their children's behavior, as exemplified in the saying '*It's the fathers' fault if the child behaves badly*' from Lun Yu (Lun Yu, 1533). When it comes to parenting practice on children, the most frequently used term is *guanjiao*, which implies care and nurturing under supervision and discipline. Such cultural phenomena imply that behavioral control is a highly favored and frequently used method in Eastern culture parenting (Wu, 2012).

Psychological Control. Psychological control refers to a dimension of parenting style that involves coercive and intrusive control strategies (Wei et al., 2022). Behaviors in psychological control usually displayed as constraint on verbal expression, personal/emotional

abuse, and guilt induction. Research show that psychological control may impede children's sense of autonomy and is associated with poor social relationships and separation anxiety in children (Farber et al., 2025; Rogers et al., 2020). Parents of Eastern cultures hold a very different view of psychological control compared to parents of Western culture. In Asian cultures, psychological control is not perceived as intrusive and that some forms of psychological control, such as relational induction were found to be less harmful compared to their White counterparts (Zhu et al., 2026). However, recent evidence continues to suggest that psychological control, especially harsh control and love withdrawal, is still associated with maladaptive child outcomes among Chinese samples (Shi et al., 2024; Tang et al., 2024).

Not only does culture determines parents' use of parenting skills such as warmth, behavior control and psychological control, it also influences specific parenting practice. For example, Asian parents exert more effort in helping their children control high arousal emotion states (e.g., anger and exuberance) as a means to maintain group harmony. In contrast, Western parents encourage emotion expression and engage in fewer parental control behaviors with their children (Yang et al., 2020).

Multi-Cultural Challenges for Asian Families

Asian Americans comprise one of the largest racial/ethnic groups in the U.S. Notably, 25.8 million Asian American are currently living in the U.S., making up 7.7% of the population (U.S. Census Bureau, 2024). Moreover, since 2010, Asians have become the largest group of new immigrants to the United States (Budiman & Ruiz, 2021). Despite their large presence, Asian Americans remain marginalized and understudied in the scientific endeavor. The reasons behind this invisibility in both the scientific field and society at large are profound.

Model Minority Myths

Asian Americans have historically been stereotyped as the 'model minority' due to their perceived high social status and academic achievements. The *Model Minority Myth* (MMM) characterizes Asian Americans as hard-working, law-abiding and successful. The term was first introduced in 1960s by sociologist Wiliam Petersen to make comparison between Asian Americans and African Americans (Wu, 2014). This stereotype not only implicitly portrayed other racial minorities as 'lazy' or 'complaining,' but also perpetuated the bias that success can be achieved simply through hard-work and obedience (Park et al., 2015).

A common belief held by the public is that Asian Americans demonstrate high levels of educational attainment as well as household income. For example, Asian Americans have the highest household median income ($101,418) among all racial groups, which is 43% greater than the national median (Asante-Muhammad & Kurani, 2023). Additionally, 33.1% of Asian Americans over the age of 25 hold a bachelor's degree, comparing to 23.4% of the total population (Kim et al., 2024). Asian Americans are also less likely to be arrested or become criminal offenders than other racial and ethnic groups (Puzzanchera et al., 2025).

However, the presented data can be misleading if interpreted without caution. An analysis from the Pew Research Center found that income inequality among Asian Americans is the greatest of all U.S. ethnic groups (Kochhar & Cilluffo, 2018). The *90/10 ratio*, which is the ratio of top 10% earners to the bottom 10%, was 13.3 for Asian Americans in 2023. This indicates that the top 10% Asian American households earned 13.3 times as much as those in the bottom 10% (Budiman, 2023). Consequently, the perception that all Asian Americans are economically thriving is a misconception.

Furthermore, the Asian American population consists of over 25 subgroups. When examining the data closely, only four subgroups (Indian, Filipino, Chinese and Japanese)

surpassed the national median income (Asante-Muhammad & Kurani, 2023). Similarly, while subgroups, such as Chinese and Indian, are more likely to hold a bachelor's degree than their White counterpart, other subgroups (e.g., Laotians) are significantly less likely to do so. Researchers also provided an explanation for those facts; immigration policies have strategically been selecting economically and educationally qualified immigrants. Given that over 80% of the Asian population consists of immigrants, some researchers argue that the high household income and educational attainment of this group can be attributed to these selective policies (Rajagopal & Durkee, 2024).

The MMM also reinforces the false assumption that Asian Americans are free from discrimination and racism, or that they may even hold privileges similar to people who identify as White. However, Asian Americans have long been perceived as *forever foreigners*, regardless of the length of their residency. This perception has been historically rooted since the caricatures of Chinese immigrants during the Gold Rush and the incarceration of Japanese Americans during World War II, to the current hate crimes against Asian Americans during COVID-19 (Kiang et al., 2016; Tessler et al., 2020). Asian Americans are also more likely than other racial and ethnic groups to be perceived as non-citizens or non-English speakers, frequently receiving questions like 'Where are you really from?' (Wu, 2002). In addition, Asian Americans face unique burdens in job promotions. The term *Bamboo Ceiling* was coined to describe the barriers Asian Americans face when advancing to leadership roles (Lu et al., 2020). Federal employment data shows that while Asian Americans make up over 20% of the permanent workforce at the National Institutes of Health, they hold only 6% of senior leadership positions (Goon et al., 2022).

The MMM affects not only how Asian Americans are perceived by other groups, but also

how they perceive themselves. For those who internalize these images, such perception can hold them up to higher standards than other ethnic groups that they must succeed academically and remain problem-free (Shih et al., 2019). Not only do these standards exacerbate the pressure they already face, but the internalization of the MMM may also reduce the likelihood of seeking professional help when facing adversities (Rajagopal., 2024).

The internalization of the MMM can also have detrimental effects on child development and family relationships. Asian American parents may require their children to pursue higher academic achievement by constantly comparing them to their better-performing peers. Such a 'pressure-cooker' environment has been found to lead to parent-child conflict, psychological problems, fear of failure, low self-efficacy and shame in children (Qin et al.,2012; Qin & Han, 2011). Additionally**,** recent studies suggest that teachers sometimes evaluate Asian students more favorably than their White peers, viewing them as especially attentive, high achieving, and academically capable (Okura, 2022; Shi & Zhu, 2023). At the same time, these stereotypes can contribute to peer harassment and higher social anxiety or psychological distress among Asian American students **(**Russell & McCurdy, 2023; Park et al., 2024). Family conflicts and parent-child alienation may arise when Asian American children fail to fit into the model minority images. To meet the requirements for conventional success (e.g., high income and social status), many Asian American college students majored in STEM field, which further perpetuates the myth that they are naturally good at math (Shih et al., 2019).

The persistent model minority stereotype that Asian Americans are thriving and therefore need no specific attention has also impacted the research field. Since 1992, only 0.17% of the federal funding from National Institutes of Health has been allocated to studies focused on Asian Americans (Doan et al., 2019). Moreover, large national datasets often lack a sufficient number

of Asian American in research for data analysis and literature review purposes. Over the past 15 years, a large number of researchers have aimed to bring Asian American mental health to public attention, worrying that the underutilization of mental health services and lack of research attention will further perpetuate the cycle of invisibility and neglect (Yip et al., 2021).

Asian American Mental Health Challenges

Research shows that Asian Americans face significant risks for mental distress compared to other groups while endorsed significantly lower rates of mental health care use than their White counterparts (Lu et al., 2025). In a national 2021 survey, 32.9% of Asian/Asian American adults reported psychological distress, and 41.8% of those with distress reported needing more mental health supports (McGarity-Palmer et al., 2023). Moreover, in 2023, only 34.7% of Asian adults with any mental illness received mental health treatment, compared with 58.7% of White adults, 43.8% of Black adults, and 47.4% of Hispanic adults (Substance Abuse and Mental Health Services Administration [SAMHSA], 2024).

Recent research continues to show that Asian Americans face multiple barriers to professional mental health care, including public- and self-stigma, anticipated family stigma and shame, low perceived need or limited mental health literacy, language barriers, and difficulty finding culturally and linguistically appropriate providers (Kim & Lee, 2021; Brewster et al., 2025; Lin et al., 2024). In addition, some Asian American clients experience a mismatch between mainstream Western therapy norms and their own cultural expectations, as traditional therapy often emphasizes direct emotional disclosure and open discussion with a relative stranger, whereas many Asian cultural contexts place greater value on emotional restraint, family privacy, saving face, and relational harmony (Maeshima & Parent, 2022; Brewster et al., 2025). As a result, Asian Americans often rely more on informal sources of support, such as family,

friends, religious communities, and complementary or alternative care, than on specialty mental health services (Kim & Lee, 2021; Park et al., 2025). Even after entering care, engagement may remain difficult when clients encounter mistrust of therapy, privacy concerns, language difficulties, lack of cultural understanding from therapists, or broader access and resource barriers (Su-Kubricht et al., 2025).

Acculturation

Acculturation describes the process of adapting to another culture, mainly the dominant one. Through this process, individuals adapt to the new culture while at the same time maintaining the practices and values of their original culture (Berry & Sam, 2016). Herskovits (1948) coined the term *enculturation* to describe the process of socialization and the maintenance of one's heritage norms, including values, beliefs, and traditional practices. Berry (1980) identified four types of acculturation strategies: assimilation, integration, separation, and marginalization. *Assimilation* involves abandoning one's heritage culture and adopting the mainstream culture. *Separation* involves maintaining only one's heritage culture, whereas *marginalization* entails separating from both cultures. *Integration*, also known as biculturalism, involves maintaining one's heritage culture while simultaneously adopting the new culture. Research indicates that pursuing integration is associated with better psychological outcomes and less acculturation-related stress (Nyugen & Benet-Martínez, 2013; Sam & Berry, 2010).

Acculturation and Implication for Chinese Parenting

Currently, approximately 5.5 million Asians of Chinese descent currently reside in the United States, making up 22% of the Asian population (Pew Research Center, 2025). In the recent decades, more research has been conducted on acculturation and its implication for Chinese parenting. Research shows that families from cultures that differ significantly in values,

beliefs, and cultural practices from the mainstream culture face a number of challenges. These include intergenerational conflicts, pressure to uphold traditional roles, and fulfill family obligations (Chung et al., 2021; Guo et al., 2020; Lo et al., 2023). Given the distinct parenting values and practices between Western and Eastern societies, Chinese immigrant parents face unique stress raising their children in a society with values that may conflict with their own upbringing and culture or origin.

Abundant research has been conducted to examine how Chinese immigrant parents navigate parent beliefs, values and practices between the dominant and heritage cultures. Recent studies show that acculturation complicates parenting, as Chinese immigrant parents and their children often hold different values in the new social context. For example, Cheung et al. (2011) found that children and adolescent tend to adapt to the mainstream culture faster than their parents. As a result, immigrant families may experience *acculturation dissonance*, manifested as conflicts in beliefs, values, and behaviors. At the same time, limited English proficiency, unfamiliarity with U.S. institutions, and the need to balance heritage values with mainstream expectations can complicate everyday parenting and parental involvement (Kong et al., 2024; Zhang et al., 2025).

Studies also have found that parent-child conflict is strongly associated with depressive symptoms in children and adolescents, problematic behaviors and lower academic performance (Chung et al., 2021, Hou et al., 2016; Juang et al., 2018). Immigrant families are likely to experience two specific types of conflict: everyday conflict and acculturation-based conflict. Everyday conflict refers to disagreement on daily issues, such as chores and schoolwork (Smetana, 2002). Acculturation-based conflict arises when parent and child disagree on core cultural beliefs (Juang et al., 2012). These two types of conflict are positively correlated,

suggesting that Chinese immigrant families experiencing higher levels of everyday conflict may also disagree on broader acculturation challenges (Lo et al., 2023). Moreover, a longitudinal study of Chinese immigrant families showed that greater acculturation-based conflict is associated with higher family alienation, greater parental control, lower family cohesion and less parental support (Juang et al., 2012).

A systematic review by Ho (2014) reported a dichotomous effect of acculturation on parenting efficacy and satisfaction among Chinese immigrant families. He noted that when acculturation is viewed as "a product of cultural immersion (p.150)," acculturation is associated with higher parenting self-efficacy. However, when viewed as a process, acculturation is closely tied to parental dissatisfaction due to the unique tensions and challenges immigrant parents face in the dominant culture.

At the same time, newer qualitative studies show that Chinese immigrant parents often adapt their parenting in flexible ways by integrating Chinese and American parenting approaches. For example, a qualitative study on immigrant Chinese parents revealed that these parents incorporate American parenting (e.g., using directive command) while maintaining Chinese language and culture (Wang et al., 2024). Similarly, Chinese immigrant parents of young children have described adjusting their parenting practices and beliefs, such as decrease educational involvement, while navigating limited English proficiency, unfamiliar U.S. systems, and concerns shaped by their own upbringing in China (Kong et al., 2024; Hyun et al., 2021).

Cultural Adaptation

Cultural adaptation refers to the process of systematically modifying an evidence-based treatment or intervention in the areas of language, concept, and context, while considering the client's cultural background (Bernal et al., 2009). To understand cultural sensitivity, Resnicow et

al. (2002) in their model identified two dimensions: surface and deep structures. Specifically, *surface structure* refers to the adapting intervention materials or activities to fit specific characteristics of the target population, such as language or music. *Deep structure* involves addressing the broader cultural, historical, social, and environmental factors that shape the population's values, experiences, and behaviors.

Several models have been proposed for the cultural adaptation of evidence-based interventions. These models outline steps to guide researchers in determining the need for cultural adaption, gathering information on elements that need to be changed, and testing the effects of the adapted intervention using qualitative and quantitative data. Castro and Barrera (2004) proposed a framework of cultural adaption model consisting of four stages: (1) information gathering, (2) preliminary adaptation design, (3) preliminary adaptation test, and (4) adaptation refinement. Similarly, the three-phase Cultural Adaptation Process Model developed by Domenech-Rodriguez and Wieling (2004) include the following steps: (1) conducting a literature review, gathering information from community members, and establishing collaboration with community leaders; (2) incorporating gathered information to make changes and conducting a pilot study; and (3) integrating findings from pilot study to revise the intervention. A critical aspect of these models is the initial step of conducting literature reviews and gathering information from targeted populations. Further adaptation work cannot be conducted without knowing exactly what needs to be tailored.

Over the past decade, addressing health disparities has been considered a pressing priority in the field of prevention. Global efforts have been made to develop, adapt and disseminate culturally sensitive and efficacious mental health intervention to diverse populations (Arjadi, et al., 2015; Castro et al., 2010; Updegraff & Umana-Taylor, 2015). Parenting

interventions are renowned for their promising short- and long-term benefits, including improving parent-child relationships, reducing child internalizing and externalizing behaviors, and prompting child healthy developmental pathways (Barlow & Coren, 2018; Pedersen et al., 2019; Basto-Pereira & Farrington, 2022). However, literature on the feasibility and effectiveness of parenting interventions among underserved populations, especially Asian populations, remains limited (Syed et al., 2026; Huang et al., 2017).

Kumpfer (2017) noted that the majority of family intervention programs are tailored for "mainstream American cultures," which predominantly reflect "White, middle-class values" (p. 224). When adapting interventions to ethnic minority populations, culturally sensitive domains such as language, concepts, goals and methods are keys to successful implementation. One major goal when adapting Western parenting interventions to non-Western cultures is to understand culture-common and culture-specific themes of parenting. Culture common themes involve goals and strategies that are universal, while culture specific themes of parenting include practices, goals and values that are essential for adapting to the resident culture (Bornstein, 2012).

Historically, researchers and mental health providers have faced the dilemma of balancing intervention fidelity with population fit. Some researchers argue that evidence-based interventions should be adapted to achieve cultural relevance, adequate engagement, and optimal outcome (Castro et al., 2004). However, other researchers express concern that modifications may compromise core components and decrease intervention efficacy (Elliott & Mihalic, 2004). To date, empirical evidence on this debate remains ambiguous. For example, a meta-analysis by Maciel et al. (2023) found that parenting interventions developed in Anglosphere countries remained effective when transported to non-Anglosphere settings. Conversely, a systematic review by Basha et al. (2024) found that the relation between provider fidelity, parent

engagement, and intervention outcomes in parenting programs remains inconsistent, partly because fidelity is defined and measured differently across studies. Moreover, a meta-analysis of culturally adapted parenting interventions for South Asian communities (Syed et al., 2026) shows that deeper cultural adaptations are associated with better intervention outcomes than surface level adaptations. These benefits include improvements in parenting behaviors and beliefs (e.g., parenting knowledge, self-efficacy, and parental involvement) as well as enhancements in child development (e.g., cognitive, social, and language skills).

Another critical consideration is that some interventions are inherently flexible, thus needing less adaptation for diverse population. Mejia and colleagues (2016) argued that instead of adaptation, which focuses on modifying the intervention itself, some interventions may achieve cultural sensitivity through flexibility. That is, these interventions allow interventionists and parents to adjust skills and practices according to their specific values and needs.

Family Check-Up

Regardless of their country of origin, positive family relationships and responsive parents are crucial for children to grow up in a healthy and socially competent matter. Research indicates that children raised in a warm, supportive and nurturing environment develop prosocial behaviors, such as self-regulatory skills, and are less likely to engage in risky behaviors, such as substance use (Biglan et al., 2012; Odgers et al., 2012). Strength-based family interventions support parents in learning proactive and positive parenting skills, such as effective requests, praise, and limit setting are essential for preventing youth problematic behaviors.

The Family Check-Up (FCU) is a brief, strength-based intervention that aims to improve family relationship and reduce problem behaviors (Dishion & Stormshak, 2007). The FCU can be used as a preventive service for families at risk or delivered as a targeted intervention for

high-risk families. Grounded in an ecological model, the FCU contains a family assessment followed by a strength-based feedback session (Dishion & Stormshak, 2007). During the process, the family coach uses motivational interviewing skills to help parents highlight their strengths, recognize their areas of growth, and identify goals that are relevant to the family concerns. Based on the family needs, parents may receive additional coaching in specific parenting skills, such as limit setting, praise and communication (Dishion & Kavanagh, 2003).

Evidence from multiple randomized controlled trials (RCTs) indicates that the FCU is effective across various age groups and implementation settings, including elementary school, middle school, and community mental health settings (Stormshak et al., 2010, 2020; Smith et al., 2014). Findings consistently shows that the model is effective in improving parenting skills and reducing problem behaviors among young children, middle school-aged children, and older adolescents (Dishion et al., 2008; Fosco et al., 2013; Stormshak et al., 2019). Additionally, the FCU has been proved to be effective among ethnically diverse samples through a number of RCTs (Smith et al., 2014; Pelham III et al., 2017). For example, Smith et al. (2014) examine the FCU in a sample of 1,193 European American, African American and Hispanic families and found that reductions in family conflict mediates youth antisocial behaviors in later ages across all three groups.

The FCU was developed as a flexible intervention that can be adapted for families from different cultural backgrounds (Dishion & Stormshak, 2007). Prior research has demonstrated its long-term benefits across diverse ethnic groups, including reductions in child internalizing and externalizing behaviors and adolescent substance use, along with improvements in child-parent relationships, school functioning, and parent self-efficacy (Smith et al., 2014; Lemery-Chalfant et al., 2018; Connell et al., 2023; Piehler et al., 2024). For example, Wu et al. (2022) found that

Black kinship families viewed the FCU as highly relevant and acceptable, especially when delivered by Black interventionists. Participants reported feeling a stronger sense of connection with interventionist who understand Black culture and shared similar lived experiences. The author also identified several cultural modifications, such as adding more hands-on parenting activities, addressing concerns specific to kinship caregiving, and recruiting using different approaches (Wu et al., 2022).

Evidence from international implementations also suggested that the FCU can be effective across different cultural context. In Sweden, Ghaderi et al. (2018) found that the FCU demonstrated both short-term and long-term effects on reducing child oppositional defiant behaviors, inattention and conduct problems. Similarly, an RCT with Canadian families found that engaging in the FCU was associated with reduction in child behavior problem severity at 12-month post enrollment. (Bennett et al., 2025).

Present Study

Family Check-up Online

The Family Check-Up Online (FCUO) was developed to overcome barriers to implementing the FCU in person. An efficacy study of the FCU Online for middle school families found that, compared to the waitlist control, families assigned to the FCU Online with coach support reported reduced emotional problems with children and increased parenting self-efficacy (Stormshak et al., 2019). Recent research suggests the effectiveness of the FCUO on rural and underserved population. Hails et al. (2025) reported that parents with depression or history of substance misuse showed improvements in positive behavior support, limit setting, proactive parenting, parenting self-efficacy, and depressive symptoms at a 3-month follow-up. Another randomized trial with caregivers of youth ages 10–14 found improvements in caregiver

stress, proactive parenting, and limit setting. Studies of engagement have also shown that participation in FCUO was very high (McWhirter et al., 2026). All parents used at least one component of the FCUO, and those with higher levels of depression, stress, lower parenting confidence, and more adolescent behavior problems at baseline were more likely to engage in coaching. McWhirter et al. (2026) also found that higher coaching engagement was associated with better parent–adolescent quality time, while higher app engagement was related to lower parent anxiety**.**

However, no prior study has examined the FCUO with Asian populations exclusively. As discussed above, Chinese American parenting involves culturally specific values, beliefs and practices that may not be fully captured by Western parenting models. Moreover, acculturation-related stress and cultural conflicts are common challenges faced by Chinese American families, which may then impact parenting practices, parent-child relationships and youth development. To date, few studies have attempted to address the unique barriers Chinese American families face in everyday life. Moreover, minimal research targeting the Chinese American population limits the opportunity to disseminate evidence-based family interventions to enhance positive family relationship and prevent future child problem behaviors. Thus, the present study is vital, as it may potentially answer the questions that whether cultural adaption of the FCUO is needed for Chinese American parents, and if so, what should be changed and what should remain unchanged.

Aims of the Study

This pilot study aims to examine the acceptability and feasibility of the Family Check-Up Online (FCUO) for Chinese American families and to assess service needs using a mixed methods evaluation design. As Bowen (2009) noted, pilot studies play an essential role in the

preparation for future full-scale research, such as RCTs. Pilot studies can help determine whether an intervention is relevant and useful to a particular population, identify barriers to participation and engagement, and generate ideas for future adaptation. Hence, a pilot study is essential to test the preliminary effectiveness of the intervention on a population that holds different cultural values, parenting beliefs and lived experiences. Therefore, the present study aims to explore whether Chinese American families may benefit from the FCUO, how they experience the intervention, and whether any cultural adaptations may be needed before conducting larger-scale trails.

Guided by Bowen's (2009) framework, the study focuses on three areas: preliminary effectiveness, acceptability, and feasibility. First, the study examines preliminary effectiveness by exploring whether participation in the FCUO is associated with improvement in parenting skills, parenting self-efficacy, and the quality of the parent-child relationship. Second, the study evaluates acceptability by exploring how Chinese American parents perceive the FCUO, including whether they experience it as relevant and responsive to their parenting needs. Third, the study assesses feasibility by examining whether the FCUO could be implemented in a practical way with Chinese American families. This includes consideration of recruitment, retention, engagement, participation in intervention activities, and families' ability to access and use the online format.

Taken together, these areas provide a foundation for determining whether the FCUO is an appropriate intervention for Chinese American families and whether a larger future trial is warranted. Accordingly, the present study is guided by the following research questions:

1. To what extent do Chinese American families show improvement in parenting skills, parenting self-efficacy, and parent-child relationship quality following participation in the FCUO?
2. How acceptable is the FCUO to Chinese American families?
3. In what ways does the FCUO address the parenting needs of Chinese American families, and what aspects of the intervention may need to be adapted to better align with their cultural values and lived experiences?
4. How feasible is the FCUO for Chinese American families?

Study Design

Pilot Feasibility Study

The current study followed the guidelines proposed by Tersi et al. (2022) as well as the framework developed by Bowen et al. (2009). Pilot feasibility studies are critical for informing decisions about whether and how to culturally adapt an evidence-based intervention. The primary aim of such studies is to determine if the intervention is feasible for the targeted population (Leon et al., 2011).

Bowen et al. (2009) proposed eight areas of focus for feasibility studies, and the present study focuses on four of these domains: acceptability, implementation, practicality and adaptation. *Acceptability* examines how recipients react to the intervention, whereas *implementation* assesses the extent to which the intervention can be delivered within the fidelity as planned. *Practicality* evaluates the delivery of the intervention when resources are constrained. Finally, *adaptation* focuses on tailoring content or procedures to ensure appropriateness for a new situation or population.

Quantitative metrics, such as retention rates and pre-post results, are commonly used to

determine whether the feasibility study meets established milestones and should proceed to the next stage of efficacy testing (Stewart et al., 2020; Chan et al., 2017). However, relying solely on binary feasibility data provides limited insight into the intervention context and is insufficient to answer critical questions, such as “Which specific aspects of the intervention were or were not feasible”” and “What specific improvement are needed to enhance feasibility?” (Aschbrenner et al., 2022). To address these limitations, the collection of qualitative data allows for a deeper exploration of feasibility domains.

Mixed-Method Study Design

It is suggested that a combination of quantitative and qualitative methods (mixed method) to be the best way for assessing the feasibility of intervention implantation (Tersi et al., 2022). Mixed method research is applied when researchers intentionally integrate quantitative and qualitative during data collection and analytic procedures, with the aim to generate a more comprehensive and nuanced understanding within a single study (Creswell et al., 2011). However, designing and conducting mixed method studies can be complex, and a number of factors should be considered to ensure rigorous implementation.

First, the timing of quantitative and qualitative data collection is an important design consideration. In convergent design, researchers collect both quantitative and qualitative data separately and integrate the data to better answer the designed research questions. The analytic procedure involves merging the data and synthesizing the results to generate a comprehensive interpretation. Sequential design is utilized when researchers have one dataset build upon the results of the other. Specifically, quantitative or qualitative data are collected and analyzed first, followed by the collection of other type of data based on the analysis results (Clark, 2019). The present study utilizes the convergent design.

The second planning consideration involves aligning quantitative and qualitative data sources with specific feasibility domains. To ensure that sufficient information is gathered to address the research questions, researchers should systematically plan data collection procedures, including the development of a data source table (Fetter, 2019). A common methodological pitfall is the failure to align quantitative and qualitative data sources to meet the pre-specified criteria used to evaluate feasibility. Once data sources align with both feasibility domain and progression criteria, researchers should determine the appropriate participant samples to inform the study's aims.

The third planning consideration involves determining the optimal time for quantitative and qualitative data collection. Researchers should identify the most appropriate stamp-point for data collection with the flow of the pilot feasibility study activities. Aschbrenner and colleagues (2022) emphasize the importance of carefully selecting the time of qualitative data collection. They argued that although collecting qualitative data at the end of a trail may be beneficial for investigating certain feasibility questions, the approach may fail to capture information regarding other feasibility questions, such as recruitment and retention.

The fourth planning consideration involves the procedures for gathering and interpreting quantitative and qualitative data through the use of integrative analytic methods. The most commonly used method is to develop a joint display, which uses tables or figures to compare, synthesize, or interconnect quantitative and qualitative data and results (Creswell & Clark, 2017). Joint displays are effective in presenting integrated results, and they help the researchers generate new insight by bringing different strands of data.

The final planning consideration involves preparing to draw meta-inferences about feasibility from integrated quantitative and qualitative data. Meta-inferences require researchers

to draw from both qualitative and quantitative result to develop implications regarding what has been learned. These meta-inferences can help to inform future trail designs as well as address the limitation of the current study (Tashakkori et al., 2020). Researchers are encouraged to revisit the inconsistencies that emerged during data analysis to develop a more nuanced understanding about the feasibility and acceptability of the present study.

Qualitative Methodology

Qualitative approaches are known for their diversity, richness and complexity. These methods provide in-depth information of nuances and contradictions, while allowing access to meaning within contexts. Qualitative approaches offer the opportunity for each participant to respond to questions in their own way and allow the existence of context-specific variation (Braun & Clarke, 2006). A distinct feature of qualitative approaches from quantitative methodologies is the emphasis on understanding how individuals perceive and interpret their own experiences (Riger & Sigurvinsdottir, 2016). Qualitative methodology plays an important role in adapting an intervention, as it offers insights into the conceptual understanding of frameworks and provides essential information directly from the targeted population. As such, incorporating qualitative methodology is critical when accessing feasibility and acceptability of an intervention for a new population.

Thematic analysis is widely considered a foundational method for qualitative analysis, in which it aims to identify, analyze and report patterns (themes) within data (Braun & Clarke, 2008). This method involves a number of steps designed to identify recurring themes or concepts across the textual dataset. Thematic analysis is renowned for its flexibility, as it can be used across different theoretical frameworks. Furthermore, it is one of the most commonly used qualitative approaches when examining cultural adaptation intervention in mixed method

research (Betancourt et al., 2011; Willis & Neblett, 2023). It gives voice to those who are traditionally underrepresented or understudied in research to articulate their lived experiences in their own words.

Although content analysis also involves coding data, thematic analysis is distinct in that it does not involve treating the code statistically. Rather, thematic analysis seeks to develop themes or patterns based on the data. Researchers utilizing thematic analysis may choose to identify all themes presented in dataset or focus on specific themes, allowing for a more nuanced examination (Braun & Clarke, 2006). A theme typically emerges multiple times within and in-between interviews and it captures important information related to research questions as well as the lived experiences of participants (Riger & Sigurvinsdottir, 2016).

CHAPTER 2

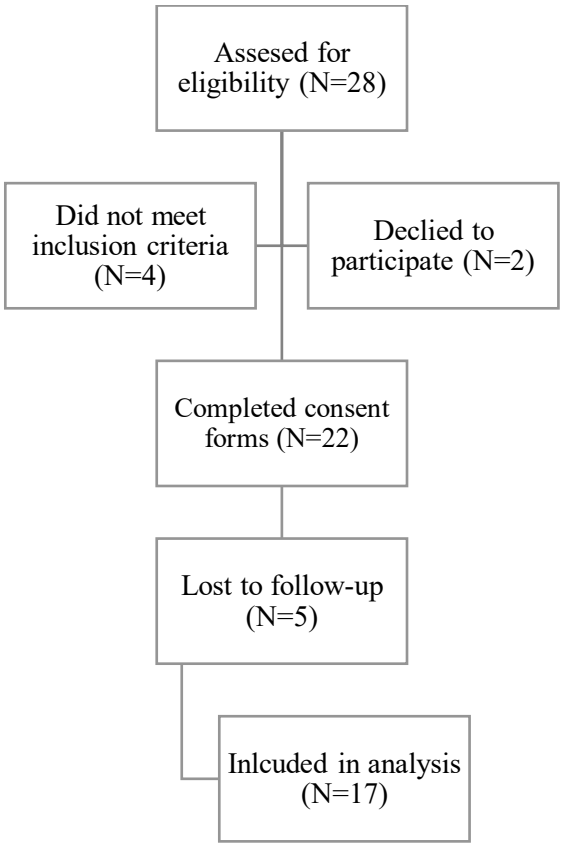
METHODS

Sample

The participants in this study were Chinese American parents of school-aged children between age of 8 to 14 years old. The sample was recruited from across the United States through flyers and in-person recruitment efforts. The study began in 2023 and ended in 2025. Parents who met the following criteria were eligible for the study: (a) self-identify as Chinese/Chinese American, (b) currently reside in the United States, (c) have legal guardianship of their child(ren), (d) are fluent in English in reading, writing and communicating, and (e) have access to electronic devices, such as tablet, computer or smartphone. No children were included in this study.

Figure 1. presents the recruitment results. A total of 28 Chinese American parents signed up for the study. Among these participants, four were excluded as they did not meet the inclusion criteria, and two declined to participate after reviewing the consent forms. Twenty-two participants signed the consent forms, but five withdrew during the study without known reason. Consequently, 17 participants were included in the final analysis.

Figure 1. Recruitment results



Study Procedure

Participants were recruited from Chinese American communities nationwide through community outreach and social media recruitment efforts. Flyers in both Chinese (Mandarin) and English were distributed via social media platforms such as Instagram and Facebook, as well as Chinese American group chats. I also engaged in-person recruitment at Chinese American churches and community centers. The flyers included information related to the study, including its purpose, benefits, compensation and contact information (See Appendix A). Participants who were interested in participating either emailed the research staff or filled out a form through the QR code provided on the flyer indicating their name, phone number and availability in the next two weeks. The study interventionist, which was the author, visited the study sign-up survey on a weekly basis and contacted the families who have expressed interests in participating in the study by conducting a 20-minute phone call.

At the time of recruitment, the interventionist administered a screening questionnaire, reviewed the key element of the present study and answered parents' questions about the study. The screening questionnaire contained five questions to ensure the eligibility of the participants (See Appendix B). Participants who met the inclusion criteria and indicated willingness to participate were emailed a link to consent forms in Qualtrics. Consent forms consisted of key elements of the study including the purpose, duration, the steps involved and potential risk and benefits of the study (See Appendix C). Participants were asked their willingness to participate in the intervention as well as the focus group after the intervention. At the time of the phone call, the study interventionist asked participant's preference between completing the parenting questionnaire on their own or as an interview. Participants who chose to complete the assessment on their own received an email that included a personalized link to the baseline assessment and a "special word"- a five-letter word that served as their unique ID for the study. Participants who opted for an interview were scheduled for a phone or Zoom appointment to complete it. The parenting questionnaire at baseline included unpublished questionnaires developed for the FCU that asked questions about parenting practices, parenting self- efficacy, family dynamics, family demographics, and parent well-being.

Family Check Up Online Intervention Protocol

Once surveys/interviews were completed, participating families were contacted by the study interventionist to schedule an initial phone or Zoom session. During the session, the interventionist (coach) shared information about the FCUO process, gathered information from the participant, and motivated the participant to engage in the program. After the initial meeting, the participant received an email that includes information about how to log in to the app.

Participants logged in to the FCU app where they complete the first module, which

included a brief 5-minute assessment, feedback on their data, and online tools to support their parenting in areas identified as challenges by the assessment. Participants were offered a number of parenting skills practices in five modules listed in the next section (See Appendix D for app screenshots). In addition, the interventionist contacted participants after completion of the first module to talk through their results, help them set goals, offer support over the phone/Zoom, and help motivate participants to improve parenting practices. Participants could contact their interventionist as often as they liked and had at least 5 scheduled phone sessions with the interventionist (i.e., one after the completion of each module). Parents were invited to participate in a posttest after completing the intervention. This survey included questions from the baseline questionnaires as well as their satisfaction toward the intervention.

FCU Online Content. Participants received a variety of follow-up activities based on the assessment result. These tools included videos, animated videos, parenting tips, and interactives. Participants were also given the opportunity to practice parenting skills. Participants were able to log-in as often as they like and interact with any of the parenting skills sessions on the app. The skills sessions in each parenting module were guided by our Everyday Parenting curriculum (Dishion et al., 2011). The skills sessions consisted of content and structured activities that were designed to help participants learn each skill. According to Connell and Stormshak (2023), each module should take around 15 minutes to complete.

Healthy Behaviors for Stressful Time. This module aims to educate participants on the importance as well as the ways to support their child in seven areas of their life, including emotional well-being, coping with stress, social connections, dietary habits, body image, physical activity and screen time (e.g., social media.)

Positive Parenting. This module includes four educational content address that focus on positive behavior support, including praise, spending quality time, giving direction, and using incentives for positive behaviors. In that, the "praise" content area teaches participants how to use positive language to communicate with their children and the "spending quality time" content area emphasizes the importance of spending non-distracted time with children. The "giving direction" content area aims to help participants develop basic skills for behavior building. The "incentive" content area aids parents to manage child behaviors through incentive and planning.

Rules and Consequences. This module includes setting clear rules, monitoring, ignoring, limit setting, and establish proper consequences. The "clear rules" content area is designed to teach participants to establish clear instructions and expectation. In this section, participants are also asked to track desirable and undesirable behaviors of their child. The "monitoring" content area urges parents to keep track of their child's behaviors, especially when they are not under the supervision of parents. The "consequences" involves developing incentives and consequences collaboratively with the child to reduce negative behaviors and promote positive behaviors. "Ignoring" teaches participants the situations when to not responding to child's needs and words.

Support School Success. This module provides helpful tips and skills for participants to establish home routines (e.g., morning and nighttime routine). Moreover, it provides skills to help participants support their child's success at school (e.g., organizing homework).

Communication. This module focuses on teaching participants effective communication skills with child, including active listening skills (e.g., ask questions and restate with feelings as well as negotiation skills (e.g., steps of solving family problems).

Focus Groups

After the intervention, focus groups were conducted to understand whether the FCUO aligns with Chinese American parenting values. The focus groups included parents who completed the FCUO intervention and agreed to participate by signing the consent form. Focus groups were utilized to elicit ideas and opinions about the content and structure of the FCUO. Two of the most commonly used methods of collecting qualitative data are in-depth individual interviews (IDIs) and focus groups (FGs). IDIs were often believed to be the best way to collect more detailed thoughts and feedback regarding to each individual, while FGs were often used to observe group dynamics and foster broader discussion (Guest et al., 2017). Research shows that when conducted in-video or in-person modalities, IDIs and FGs do not differ significantly in terms of thematic content (Guest et al., 2020). As a result, the current study used a combination of IDIs and FGs because two participants were unable to attend FGs due to availabilities conflicts. The focus group included 15 participants in total, with six groups consisting of two participants and one group consisting of three participants. Each focus group lasted approximately 90 minutes. Two participants were unable to attend a focus group due to scheduling and availability constraints and therefor completed individual interviews, which lasted approximately 60 minutes each.

Measures

Demographic Characteristics

Family background information was collected from participants through the use of a standardized demographic questionnaire. The questionnaire assessed participant characteristics, including gender, age, education level and immigrant generation, as well as child demographic characteristics such as age and gender.

Program Engagement

Participant engagement with the FCUO was monitored via backend website data. Data extracted for analysis include the number of logins, time spent (in minutes) on each five modules (Healthy behaviors for stressful time, Positive parenting, Rules and consequences, Support school success, and Communication), total time spent on the app (in minutes) and participants' assessment pre- and post-intervention.

Program Outcomes

Parenting Self-efficacy. An abbreviated version of the Parenting Tasks Checklist (Sanders & Wooley, 2005) was adapted for the current study. Parents were asked to rate how important they believed each skill to be (1 = "not important at all", 5 = "very important") and how confident they felt practicing each skill (1= "not at all confident", 5 = "very confident") on 14 parenting skills questions (e.g., "providing praise and encouragement for good behavior"; "setting limit with your child"; "listening to your child"). Internal consistency in this current sample was α= .86 (Importance) and α= .85 (Confidence).

Parenting Skills. Parents completed the Parenting Young Children scale (PARYC; McEachern et al., 2012), a 21-item validated self-report measures with three subscales of parenting skills, including Supporting Positive behaviors (e.g., "Notice and praise your child's good behavior"), Setting Limits (e.g., "Stick to your rules and note change your mind"), and Proactive Parenting ("Avoid struggles with your child by giving clear choices"). Parents were asked to rate the frequency of their use of parenting skills in the past month on a 5-point Likert scale (1= "Never" and 5 = "Very Often"). Internal consistency in the current sample was α = .82 (Positive parenting), α = .77 (Proactive parenting), and α = .74 (Limit Setting)

Family relationship. Parents also completed two family-relationship subscales including: 1) parent-child relationship, 5-items reflecting parent and child relationship (e.g., "If upset, this

child seeks comfort from me") on a 5-point Likert scale (1 = Definitely not, 7 = "Definitely"), and 2) family conflict, 4-items assessing the frequency of child and parent conflictual behaviors in the past month, such as "My Child got his/her by getting angry" on a 7-point Likert scale (1= "Never", 7= "More than 7 time"). Internal consistency in the current sample was $\alpha = .89$ (Parent-child relationship) and $\alpha = .65$ (Family conflict).

Program Satisfaction. Parents are asked to complete a feedback survey after the intervention with the aim to examine the level of helpfulness of the program (e.g., "The program gave me new ways of looking at my parenting."), usability of the program (e.g., "I though the program was easy to use"), and the level of changes observed in the family (e.g., "my communication with my child has improved").

Qualitative feedback. Qualitive interviews were conducted to gather information relevant to user experiences and needs to change. Participants were asked to answer a set of open-ended questions related to acceptability and feasibility (See Appendix E).

Data Analysis

Quantitative Analysis

Quantitative analyses were performed using R Studio. Descriptive data regarding participant's demographics is reported in Table 1. Program engagement data, including the number of logins, time spent in total, time spent on each model as well as time spent with interventionist are presented in Table 2. Regarding sample size, recent reviews of feasibility studies indicate that target sample sizes commonly fall in the range of 20–50 participants for continuous outcomes (Totton et al., 2023). Although the current study sample was slightly below the median range, Totten et al., (2023) argued that the sample size varied widely in different studies and that sample size should be determined based on the study's primary objectives. As a

result, a sample of 17 participants was deemed sufficient for the exploratory aims of the present study, while acknowledging that the sample was not powered to detect definitive inferential effects (Totton et al., 2023). Notably, although pilot studies typically lack sufficient power to test effect sizes, other statistical estimates, such as means and confidence intervals (CI), can still be informative regarding trends (Bowen, 2009).

Qualitative Analysis

The present study adheres the six-phase thematic analysis framework developed by Braun and Clarke (2006): (1) immersing oneself in the data; (2) generating initial codes; (3) searching for themes; (4) reviewing themes; (5) defining and naming themes; and (6) producing the report.

Video recordings of the focus groups and individual interviews were transcribed verbatim, including pauses, emotional expressions (e.g., laughter) and overlapping speech where these contributed to meaning. Non-verbal behaviors observed in the video (e.g., nodding) were noted in brackets when necessary for interpretation. To ensure confidentiality, all identifiable information was redacted during transcription process and participants were assigned pseudonyms. Prior to analysis, the accuracy of the transcript was checked against the video recordings.

The author then familiarized with the data by reading the transcripts multiple times and re-watching segments of the video recordings. During the initial coding phase, an inductive coding approach was used to allow patterns and themes emerge from the data, instead of applying a priori codes from the existing literature. Each transcript was coded line-by-line using Delve. Codes at this phase were generated from participants' language to reflect both semantic (explicit) and latent (interpretive) meanings. To ensure consistency and analytic sensitivity,

codes were systematically compared within and across transcripts. A second coder coded the transcripts independently following the same coding protocol for reliability. After the initial independent coding phase, two coders met to compare code lists and discuss areas of agreement and disagreement. Difference in coding were examined through joint re-reading of the transcripts, with attention to the contextual and interpretive assumptions underlying each coding decision (See Appendix F for an example from the codebook).

Patterns of codes were then collaboratively examined and grouped into broader categories representing shared meanings across participants. These categories were then further reviewed and refined to develop candidate themes, following the thematic analysis procedures established by Braun and Clarke (2006). Theme development involved iterative movement between the coded data, the full transcript, and the emerging thematic structure to ensure that themes were internally coherent and distinct. To enhance analytic transparency and trustworthiness, an audit trail was maintained through the analytic process, including documentation of coding decisions, codebook development and revisions, analytic memos, theme refinements, meeting note and rationales for changes to the thematic structure (Nowell et al., 2017). The analytic process, preliminary description of themes and exemplary quotes were refined and confirmed by the committee chair during scheduled meetings.

Mixed Method Analysis

Quantitative and qualitative strands were integrated to examine the overall feasibility. Quantitative and qualitative findings were examined both separately and in relation to one another through an iterative process. Quantitative analyses were first conducted to identify changes in parenting and family outcomes. At the same time, qualitative interview data were coded and developed into themes reflecting participants' experiences of the interventions. As

preliminary themes emerged, the author returned to the quantitative findings to consider whether participants' narratives helped explain, elaborate, or complicate the patterns. Similarly, quantitative trends helped further refine the qualitative patterns related to parenting and family outcomes, as well as perceived cultural fit.

Integration process involved a direct comparison of quantitative results with relevant qualitative themes through this back-and forth examination. Through this comparison, meta-inferences were developed to reflect both participant perspectives and performance data. During integration, three types of relationships between the data were examined: *convergence*, which occurred when quantitative and qualitative findings supported each other; *divergence*, which emerged when findings did not align, prompting a closer examination of possible reasons for variation; and e*xpansion,* wherein one type of data provided additional detail or context to the other, thereby broadening the conceptual understanding of feasibility (Schoonenboom, 2022). To support this process, a *joint display* was created to placed quantitative results and qualitative findings side by side and help interpret the data. Insights derived from this integrated analysis informed how workable and acceptable the study procedures were and highlighted areas for potential improvement.

Positionality Statement

While knowledge generated from quantitative research is often viewed as objective and universal, information interpreted from qualitative studies is inherently subjective and personal. I believe that each individual views and understands the world differently. Therefore, in the context of this study, my subjectivity informs the research questions and methods, as well as the assumptions I hold regarding the research topics. As a result, it is vital to acknowledge my

positionality and discuss how it has shaped my research focus.

My identities influence how I see the world, how I interact with others, and how I wish to contribute to society as a future psychologist. I am a cisgender, bisexual, able-bodied Chinese woman with socioeconomic and educational privileges. These privileges have offered me the opportunity to travel from China to the United States and pursue a doctoral degree in Counseling Psychology. They have also enabled me to see a world my family never had the chance to witness.

However, during my 15 years living in the U.S., I have also witnessed the "invisibility" of Chinese Americans. As I continued my studies, I became aware of the unique stressors this group faces during acculturation, as well as their marginalization within the field of psychology research. The challenges and discrimination they face often seem buried under the "model minority" myth. Moreover, some traditional values have also became barriers to seeking professional help, as individuals are often told that such issues should be kept "within the family."

My passion for empowering Chinese Americans through clinical practice and research grew stronger as I discovered the limited resources and opportunities available to them in the mental health field. When conducting preliminary research on parenting interventions targeted at Chinese Americans, I found a scarcity of literature. As a Chinese woman, I believe that family can be an invaluable source of strength and that a positive family environment fosters better child development. Ultimately, I decided to take the first step toward providing more resources for Chinese American families. Guided by values of contribution, cultural humility, and respect, I developed this study and the research aims.

CHAPTER 3

RESULTS

Participant Demographics

A total of 17 participants completed the pre-test, FCUO intervention, post-test and interviews. All participants identified as first-generation immigrant, and the majority of them were female (87%). Participants ranged in age from 35 to 51 years (M = 42.7, SD = 6.24), with a median annual family income falling within the $100,000 – $149,999 bracket. Most of participants (*88.24%*) reported Chinese as the primary language spoken at home. In terms of educational attainment, the majority of parents (N=16) held a bachelor's degree or higher. The children ranged in age from 9 to 14 years with the average age being 11.6 years (SD = 1.62). Additional demographic information is presented in Table 1.

Table 1. *Study demographic characteristics (N = 17).*

Variable		*N (%)* or *M (SD)*
Gender	Female	15(87)
Parent Age	In years (range = 35-51)	42.7(6.24)
Generation	First generation	17(100)
Primary language at home	Chinese	15(88.24)
	English	1(5.89)
	Both	1 (5.89)
Education	High school graduate	1 (5.89)
	4-year degree	7 (41.18)
	Professional degree	5 (29.42)
	Doctoral degree	4 (23.53)
Marital Status	Married	15 (88.24)
	Divorced	2 (11.76)
Income	$10,000 - $39,999	1 (5.89)
	$40,000 - $69,999	2 (11.76)
	$70,000 – $99,999	5 (29.41)
	$100,000 - $149,999	5 (29.41)
	More than $150,000	4 (23.53)
Child Age	In years (range = 9-14)	11.6 (1.62)

Quantitative Results

Program Engagement

Among the 22 eligible participants, 17 of them completed the study. Table 2 presents a summary of program engagement among participants. On average, participant spent 103 minutes engaging with the content (*SD*=41.11, range = 20-158). Regarding coach support, the mean duration of consultation with the interventionist was 50.18 minutes (*SD*= 37.12, range = 11-148). Analysis of module-specific usage revealed that participants spent the greatest amount of time on the Healthy Behaviors for Stressful Time module (*M*= 29.53, *SD*= 12.75, range= 7-53). In contrast, participants spent the least amount of time on Support School Success module (*M*=11.47, *SD*=10.03, range = 4-44).

Engagement data in the present study showed a pattern of declining use across the FCUO, with participants spending the longest amount of time on the first module. This finding is consistent with Doty et al. (2016), in which they reported a heavier use of first components in the earliest modules, suggesting that the parents may be most likely to engage with online parenting content at the beginning of an intervention, when motivation may be the highest.

Table 2. *Program engagement results (N=17).*

Variable	In range	M(SD)
Number of logins	5-25	10 (4.83)
Time spent in total (In minutes)	20-158	103 (41.11)
Time spent on each module (In minutes)		
Healthy behaviors for stressful time	7-53	29.53 (12.75)
Positive parenting	3-49	20.35 (10.71)
Rules and consequences	4-66	25.35 (16.16)
Support school success	4-44	11.47 (10.03)
Communication	2-62	16.29 (12.73)
Time spent with interventionist (In minutes)	11-148	50.18 (37.12)

Preliminary Intervention Outcomes

Montgomery (2005) in their study argued that paired designs improve statistical efficiency relative to independent designs. Table 3 displays descriptive statistics and results from paired-sample t-test results of the preliminary intervention outcomes. A series of paired-samples *t*-tests were conducted to understand the impact of the intervention on parenting self-efficacy, parenting behaviors, and family relationships. Overall, participants showed improvement in mean scores across all examined domains. However, given the nature of the pilot study and limited sample size, some observed changes did not reach the threshold for statistically significant. Detailed findings for each domain are reported below.

Parenting Self-efficacy. Analyses indicated that the overall mean score for parenting self-efficacy increased by .27 points from pre-test (M = 4.13, SD = .38) to post-test (M = 4.40, SD = .33), which was statistically significant (t = 3.56, p = .00***3***, d = 0.72). A breakdown of the two subscales showed that significant improvement was largely contributed to the increases in parenting confidence. Specifically, participants reported significantly higher confidence in utilizing parenting skills at post-test (M = 4.10, SD = .43) compared to pre-test (M = 3.64, SD = .59; t = 3.85, p = .003, d = ***.88***). This finding suggests that the intervention might significantly increase participants' confidence in parenting. Notably, participants endorsed high level of importance at both pre-test (M = 4.63, SD =.39) and post-test (M = 4.69, SD = .39), suggesting a ceiling effect regarding the perceived importance of parenting skills. While these results should be interpreted with caution given the small sample size, the confidence interval ***of parenting self-efficacy*** (95% CI [.11, .41]***, t = 3.56***) supports the potential utility of the intervention and underscores the need for further evaluation with a larger sample.

Parenting Behaviors. As is common in pilot feasibility trials with limited statistical

power ($N = 17$), changes in parenting behaviors did not reach statistical significance ($p = .148$). However, the overall mean score of parenting behavior increased from 3.77 ($SD = .56$) at pre-test to 3.91($SD = .43$) at post-test ($t = 1.52$, $p = .148$. *95%* CI [-.06, .33]), indicating directional improvements. Moreover, the 95% confidence interval reveals that the plausible range of the true treatment effect is heavily weighted toward a positive outcome.

Positive & Proactive Parenting. Consistent with the overall trend, both sub-constructs demonstrated slight increases in mean scores. Specifically, positive parenting increased by .14 points from pre-test to post-test ($M_{diff} = .14$, $p = .205$, $t = 1.31$, $d = .23$, 95% CI = [[-.09, .37]), while proactive parenting increased by .15 points ($M_{diff} = .15$, $p = .102$, $t = 1.74$, $d = .22$, 95% CI [-.03, 31]).

***Limit Setting*.** Mean scores for limit setting improved from 3.88 ($SD = .63$) at pre-test to 4.05 ($SD = 0.52$) at post-test. Although this difference was not statistically significant ($t = 1.14$, $p = .27$, $d = .29$, 95% CI [-.01, .48]), the positive change in mean scores is promising for a pilot trial.

Family Relationship. Analyses revealed significant improvements in the parent-child relationship, alongside with positive trends in the reduction of family conflict.

Parent-Child Relationship. Mean scores for the parent-child relationship demonstrated a statistically significant increase from pre-test ($M = 4.42$, $SD = .67$) to post-test ($M = 4.67$, $SD = .59$, $t = 3.44$, $p = .003$, $d = .32$). The 95% confidence interval (95% CI [.09,.40]) showed positive shift in relationship quality. This finding indicates that participants experienced a better relationship with their children after completing the program.

Family Conflict. Regarding family conflict, mean scores decreased from 1.99 ($SD = .53$) at baseline to 1.69 ($SD = .64$) at post-intervention ($t = -1.77$, $p = .096$, 95% CI [-.65, .06]) . While

this difference was not statistically significant, the analysis yielded a medium effect size (d = −.50). This indicate that the intervention warrants further investigation with a larger sample size.

Interpretation of Non-Significant Results. The non-significant result may be attributed to two primary factors: small sample size and the limited intervention timeframe. The small sample size makes clinically significant hard to achieve as the ratio to each participant is heavy. Additionally, most participants completed the study within a two-month window. While they felt more confident by the end of this pilot phase, actual behavioral changes in the family dynamic may take longer to appear.

Table 3. *Preliminary outcomes pre- and post-intervention and effect size for paired samples t-test (N= 17).*

	Pre (N =17)		Post (N=17)		t	P value	Cohen's d	Confidence interval (95%)
	M	SD	M	SD				
Parenting self-efficacy	4.13	.38	4.40	.33	3.57	.003*	.72	[.11, .41]
Importance	4.63	.39	4.69	.39	.60	.559	.15	[-.15, .27]
Confidence	3.64	.59	4.10	.43	3.85	.001*	.88	[.21, .72]
Parenting Behaviors	3.77	.56	3.91	.43	1.52	.148	.26	[-.06, .33]
Positive Parenting	3.70	.65	3.84	.44	1.31	.205	.23	[-.09, .37]
Proactive Parenting	3.77	.66	3.92	.53	1.74	.102	.22	[-.03, .31]
Limit Setting	3.88	.63	4.05	.52	1.14	.27	.29	[-.01, .48]
Family Relationships								
Parent-child relationship	4.42	.67	4.67	.59	3.44	.003*	.32	[.09, .40]
Family conflict	1.99	.53	1.69	.64	-1.77	.096	-.50	[-.65, .06]

*p<.01

FCUO Module Performance

15 out of 17 participants completed the post-survey for all five modules on the app,

demonstrating various levels of improvement. In terms of specific models, all 15 participants showed improvement on Rules and Consequences module. Additionally, 13 participants improved on Healthy Behaviors for Stressful Time, followed by 11 in both Positive Parenting and Communication modules, and 8 in Support School Success module. Table 4 presents the participants' average scores across the five modules, categorized in three levels: Focus Area(red), Needing Attention(yellow), and Area of Strength(green). Results indicate a decrease in average scores in the Focus Area and an increase in average scores in Area of Strength across all modules, except for Support School Success.

Table 4. *Participants average scores across FCUO modules pre- and post-intervention (N=15).*

	Pre-survey (*Mean & SD*)			Post-survey (*Mean & SD*)		
	Focus area	Needing attention	Area of strength	Focus area	Needing attention	Area of strength
Healthy Behaviors for Stressful Time	1.53(1.46)	1.87(.92)	3.13(1.88)	1.13(1.25)	2.4(1.59)	3.47(2.10)
Positive Parenting	1.21(1.19)	1.14(.95)	1.63(1.34)	1(1.24)	1.13(1.05)	1.87(1.12)
Rules and Consequences	1.73(.96)	1.87(1.19)	2.4(1.45)	.93(0.88)	2.2(1.42)	2.87(1.51)
Support School Success	.31(.49)	1.38(1.54)	1.81(1.76)	.5(.63)	1.94(1.12)	1.56(1.46)
Communication	.28(.61)	1.6(1.28)	1.79(1.48)	.27(.43)	1.6(1.09)	2.13(1.19)

Program Satisfaction

Table 5 presents descriptive statistics regarding participant satisfaction with the FCUO. Program acceptability was assessed among four key domains: course helpfulness, intervention usability, perceived parenting changes, and program recommendation. Ratings were analyzed descriptively using predetermined interpretive benchmarks from prior feasibility and acceptability studies, in which mean ratings of 4.0 or higher on 5-point Likert-scale items were interpreted as indicating high acceptability and rating between 3.0 -3.99 were interpreted as

moderate or moderate to high favorable (Weiner et al., 2017; Friedman et al., 2024)

Intervention Usability and Accessibility. Participants rated the usability of the intervention highly among all categories. The program was viewed as easy to navigate (M = 4.82, SD = .39), and parents reported learning new skills from the FCUO (M = 4.76, SD = .43). Notably, zero participants reported issues with internet access.

Course Helpfulness. Participants indicated that the program facilitated decision-making process (M = 4.58, SD = .51) and identified their personal strengths (M = 4.47, SD = .51). Furthermore, participants reported that the course offered new perspectives on parenting (M = 4.41, SD = .51) and helped them in setting realistic goals (M = 4.41, SD = .51).

Perceived Parenting Changes. Participants reported progressing toward their goals (M = 4.00, SD = .79) and their motivations to change was rated as moderate to high (M = 3.82, SD = .80). However, parents rated the improvement in communication with their children relatively lower compared to other domains. This finding aligns with the previously reported results for parenting self-efficacy and parenting behaviors, suggesting that while participants learned new skills, the observable changes (e.g., improvement in communication) require a longer period to manifest.

Program Recommendation. Program recommendation was measured twice, first through the feedback survey and later during the focus group interview. In both assessments, participants reported moderate to high levels of willingness to recommend the program. On the feedback survey, participants gave a moderate rating on the statement, “I would recommend this program to my friends and family” (M = 3.79, SD = .59). In the focus group interview, participants reported a moderate-to-high likelihood of recommending the FCU Online to other Chinese American families on a 10-point scale (M = 6.75, SD = .70). These findings suggest that

participants generally perceived the program as helpful and acceptable, while also indicating some reservation about recommending it more broadly to other Chinese American families.

Table 5. *Program satisfaction.*

Measures		*M* (*SD*)
Course helpfulness		
Gave me new ways of looking at my parenting	Strongly disagree to strongly agree (Range 1-5)	4.41 (.51)
Gave me realistic ideas of making decisions	Strongly disagree to strongly agree (Range 1-5)	4.58 (.51)
Let me focus on areas I wanted to work on.	Strongly disagree to strongly agree (Range 1-5)	4.35 (.49)
Helped me identified my strengths.	Strongly disagree to strongly agree (Range 1-5)	4.47 (.51)
Helped me set goals I could reach	Strongly disagree to strongly agree (Range 1-5)	4.41 (.51)
Intervention usability		
I thought the program was easy to use.	Strongly disagree to strongly agree (Range 1-5)	4.82 (.39)
I enjoy using the FCU Online	Strongly disagree to strongly agree (Range 1-5)	4.35 (.61)
I learned from the FCU Online.	Strongly disagree to strongly agree (Range 1-5)	4.76 (.43)
Limited internet access impacted my ability to use the FCU Online[a].	Strongly disagree to strongly agree (Range 1-5)	1 (0)
Observed parenting changes		
My communication with my child has improved	Strongly disagree to strongly agree (Range 1-5)	3.47 (.80)
The online program helped motivate me to make changes in my parenting.	Strongly disagree to strongly agree (Range 1-5)	3.82 (.80)
I am progressing toward my goals.	Strongly disagree to strongly agree (Range 1-5)	4 (.79)
Program Recommendation		

Table 5. Continued

I would recommend this program to my friends and family.	Strongly disagree to strongly agree (Range 1-5)	3.79 (.59)
On the scale from 1-10, how likely would you recommend the FCU online to other Chinese American families[b]	Not recommended to highly recommended (1-10)	6.75 (.70)

Note. [a]Reverse coding, lower score means better outcome. [b]Focus group question.

Qualitative Findings

Preliminary Intervention Outcome Themes

All 17 participants also responded to open-ended interview questions regarding program acceptability and feasibility in group or individual format. Table 6 shows the themes for each preliminary intervention outcomes construct.

Table 6. *Preliminary intervention outcome qualitative themes.*

Construct	Theme
Parenting Self-efficacy	Empowerment, competence and awareness gained from the FCUO.
Parenting behaviors	Specific skills for everyday parenting.
Family relationships	Better parent-child through the positive changes of both parent and child behaviors.

Theme 1. Empowerment, competence and awareness gained from the FCUO.

One of the major goals for participation was the desire to improve parenting skills. The majority of the participants expressed a need to validate or adapt their *"ways of parenting"* for the context of raising children as Chinese parents living the United States. One participant described a shift in perspective: *"I felt like a certain time I start to be awaken in my part of a relationship with my kiddo is that I give up the authoritarian side."*

Parents also reflect on how their own upbringing influenced their current parenting style.

For example, one parent shared the discomfort of using praise:

> *In China, we don't praise. It feels very awkward to praise your kid… we have the thought that praise will makes you... arrogant and weak… I used to worry that if I praise [my kids] a lot, they don't be able to find their mistakes and they won't be able to tolerate criticism from others.*

This participant then talked about the change of his perspective after completing the program:

> *One of the best parts about this program is that it gives me good reasons of using certain skills. Like praise, I learned why I need to praise and how to praise. I still don't think I should praise my kids very often, but I am willing to try [to praise] sometimes.*

In terms of empowerment and competence, most participants reported increased confidence in using parentings skills after the intervention. One participant noted that the program validated her efforts:

> *We are in [Location], and parents around us have very high education [background]. Most of them have at least a master's degree. But I am a home mom… so I feel they are better than me. I want to be able to teach my kids well. And when I was studying the app, I feel good because I am using a lot [of] skills taught on the app already. So, I was like, "Oh good, I am doing something well." I know I am doing it right.*

Others echoed this statement by emphasizing the need for assurance and that the content in the app confirmed that they were *"doing a good job."* Participants also mentioned that the intervention gave them specific directions to help them *"solve problems."* They noted that the intervention provided *"real-life examples"* that were relevant to their concerns. As a result, participants *"have something to look at,"* when they felt uncertain about family situations, thereby increased their confidence and competence in managing youth behaviors.

Theme 2. Specific skills for everyday parenting.

During interviews, participants talked about utility of each module. The most commonly

mentioned module was Communication. Participants reported that the module enhanced their ability to listen to their children, which further helped to solve problems. One participant shared an example:

> *When she was unhappy, I asked her what happened to her and just practiced my listening skills. I tried not talk too much… When she was upset, I tried to listen to the fact, not emotions. I think that it's really important because with that, I will ask her like what happened, what make her feel sad or unhappy, [and] what's the fact is. Then share the emotion, share the feeling with her… then we can have the conversation together to solve the problem.*

One participant also mentioned that she learned to ask follow-up questions and focus on feelings:

> *I think the apps told me to ask the question to the kids…listen more and then talk less. Like before, I always try to talk and teach her, but now I let the kids talk about their feeling. Then I restate the feeling with them.*

One participants also found the content on Support School Success to be helpful, especially establishing routines. One parent reported positive changes of her daughter after the app:

> *…my daughter was really messy about schoolwork... She…went to bed really late and I rarely check her homework or help her prepare the school staff…the app told me that we need to make the sleep routine for kids… I also need to help the kids prepare their back before they go to school. So, I try to do that after I learn from the app. Right now, she [has] the handbag ready and the food, like snacks ready, and water before she goes to school. Like she has her homework ready before school and she gets enough sleep. She gets enough sleep because the app also said we need to make the sleep routine. Like what time she need to go to sleep and what time she need[s] to wake up. So that routine also helps her for the school.*

At the same time, most participant found the content in support school success to be familiar. Similarly, Healthy Behaviors for Stressful Time was the least discussed module, as several participants noted that they were *"familiar with the content"* because they practiced most

of the skills (e.g., eating, physical well-being) *"every day."*

A notable finding was that participants expressed mixed feelings toward the Rule and Consequences and Positive Parenting modules. It is important to note that while the majority of parents acknowledged the value of all skills presented on the FCUO, some parents shared some difficulties applying certain skills.

A number of participants rated Rules and Consequences to be very helpful. They mentioned that this module helped them to establish and follow-through the rules through logic consequences. One of the participants said:

> *My favorite part is rules. Our home doesn't have a lot of rules before, so [the kid] does not know how to follow directions. He basically gets whatever he wants. So, I was kinda surprised when he followed the rules I set for him. Like when I asked him to do homework before playing games, he whined but I chose to ignore him… He then went to do his homework.*

While many participants rated this module as helpful, some expressed ambivalence. One participant talked about his thoughts toward ignore:

> *I just don't feel comfortable using it. Ignore feels like I am not a responsible parent. You cannot ignore the bad behaviors because you need to teach the kids the right way to do it… It would be very shameful if your kids don't behave well in public places.*

Other participants also noted the feeling of embarrassment when their kids *"acting out"* in public settings, such as supermarkets or malls. They reported feeling being *"judged"* by others and worried that others might *"laugh at"* them because they did not *"teach the kid well."* Additionally, a few participants expressed difficulties in utilizing ignoring at home. Several parents mentioned that a lack of support from partners or the grandparents, who often pressure them to *"take care of the kid"* immediately or *"surrender*" to the kid's requests.

All participants reported the Positive Parenting module to be helpful, particularly giving directions. One parent shared her struggle with her daughter about cleaning her room.

> *…sometimes I say "[kid's name], your room is so messy because you have clothes*

everywhere…go clean up." When she doesn't follow, I get mad because I think she was not listening. But now I learned [to] say, "[kid's name], pick up your clothes on the floor first." She did that because I give her a clear order in that moment. And then I asked her to clean her table and so on.

A content under the Positive Parenting module that received mixed feedback was praise. While all participants agreed to the importance of praising, some participants ran into linguistic and cultural barriers when utilizing encouragement and praise. Several participants mentioned feeling awkward praising their children in Chinese. One of them said:

For me, learning about praise and praising my kid in English is not that hard. I understand the values behind. So, there is no pressure to say "Thank you for helping me with dinner, [child's name]!" But most of the time we speak Chinese at home, so when I say "Xie Xie Ni Bang Wo Zuo Fan [equivalent to Thanks for helping me with dinner]" is just wired. My kid gave me that [wired] look and I felt awkward, too. It just doesn't sound right.

Theme 3. Better parenting-child relationship through the positive changes of both parent and child behaviors

Most parents identified *"having a good relationship with child"* as a core value concepts in Chinese parenting. The majority of participants reported observing positive changes in family dynamics following the intervention. One parent reported the change post to the intervention:

My daughter and I used to argue a lot because I always want her to listen to me. After I practiced the communication skills, she is less emotional... I am also less mad, too.

Additionally, some parents used this opportunity engaged in *"deep conversation"* with their children. Specifically, two parents reported watching some videos together with their children and discussing the content:

… we watched the video together and answered some questions… They learned something from the videos [about how to negotiate with parents] and I learned from them, too. I definitely have some bad days that I just yelled at my kids. So they gave me some ideas [about controlling my temper], and we developed a plan together about how

to talk nicely to each other.

Another participant further noted,

…The biggest benefit I got from this app is this [to openly talk to the children]. Because we never talk about rules or anything and I do whatever I like, but actually sometimes they don't like [the rules]. We got a chance to put everything on the table and talk about it. We learned about each other's thoughts and we both willing to try the suggestions [we gave to each other]. That's the most important things.

Program Acceptability Qualitative Themes

The discussion focused on participant's feedback of the program in the following areas: user satisfaction, accessibility considerations, and recommendations for adapting the intervention for Chinese American parents. Table 7 displayed the themes of each program accessibility constructs.

Table 7. *Program acceptability qualitative themes.*

Construct	Theme (*subtheme*)
User satisfaction	High satisfaction toward the program and the interventionist.
Accessibility considerations	Technological changes to improve user experience.
Table 7. (Continued.)	
Recommendations for adapting the intervention for Chinese American parents	More content suggestions to meet the cultural need for Chinese American families.
	Strong preference for Chinese language delivery.
	The pressing need to increase emotional competence.
	Addressing acculturation challenges of parenting between Chinese and American cultures.
	Guidance on navigating co-parenting issues.
	Strategies to manage parental stress and model self-care for children.

Theme 1. High satisfaction toward the program and the interventionist

Participants described the FCUO as "*very user friendly,"* noting that language was *"easy to the understand"* and the features were colorful. Participants appreciated that the FCUO *"teach with multimedia,"* which reduced the amount of text-reading. The majority of parents commended the bear videos because the videos demonstrated *"real-life interactions."* They also rated highly on the strength-based assessment, given its helpfulness in visualizing the strengths and areas of improvement of parenting. One of the participants mentioned about her overall impression of the FCUO,

> *…the five modules, it's easy, it's a simple… at least reading those frameworks gave me the structure. I remember [the intervention] asked me to do some self-assessment before [it] teach me all those contents. Like 'what's big areas I need to pay attention to.' I think that's a big plus for me.*

Participants also provided feedback regarding the interventionist in terms of strengths and areas of growth. First, participants reported a strong sense of cultural connection with the interventionist. They expressed a greater willingness to disclose life struggles and personal feelings given interventionist's shared Chinese heritage. One participant emphasized the importance of shared cultural background, stating *"Whom I talk to is important. We are all Chinese, so you know what I mean when I talk about Chinese cultures."* Second, participants mentioned that the coaching sessions helped them to *"learn more advance skills"* and to *"combine"* previously learned skills. One participant highlighted a consultation experience:

> *… consultation was really helpful… your consultation gave me insight into, like when I make a plan with my kids, my plan is overwhelming, too many steps. In order for my kids to receive award, it takes multiple steps, but it's not developmentally appropriate for her… the app, it's more like a rational information... but after the app and you would do some consultation, like one-on-one, I feel like those are the most rewarding practice for me.*

Conversely, some participated suggested improvement regarding the interventionist's

role. A primary concern was the ambiguity between *"research and therapy."* One participant noted feeling *"helpful and connected"* when talking to the interventionist but also recognizing constrains of the research. As a result, she reported feeling *"uncertain"* whether the scope of discussion should be *"just parenting"* or *"any personal issues."* Similarly, another participant recommended the study be clear about the services provided by the interventionist.

Several participants also mentioned the rigidity of coaching sessions. While some participants hoped to increased discussion time with the interventions, others preferred using only the app and found the mandatory meeting unnecessary. Therefore, participants suggested that coaching sessions be more flexible and tailored to each individual's needs.

Theme 2. Technological changes to improve user experience

Overall, participants reported minimal technical issues that impact access to the FCUO. The majority experienced no technical difficulties through the intervention. However, three participants encountered error with a *"blank page"* when attempting to use the FCUO on their mobile phones. To resolve the issue, two participants completed the intervention on their computer, while the third successfully access the intervention on the mobile phone after completing the registration on her computer.

With regards to technical features, two participants suggested that a *"search"* function would better help them navigate the content. Specially, one of them mentioned:

> *And I wish there is a search button… so I can search the skills I need. Sometimes, I just want to look at some skills but I have to go through the whole part again.*

Moreover, another participant provided feedback about the text-message reminder.

> *I think the message really helped me, like remind me to practice but maybe … a specific reminder parents need to know ... Maybe I can set up the reminder for myself, like 'Don't yell at the kids when you are tired,' or 'appreciate them and praise them.' Something like, customized the notification.*

Theme 3. More content suggestions to meet the cultural need for Chinese American families

The participants discussed primarily on additionally content to the FCUO that would better support Chinese parents navigate everyday parenting challenges in the U.S. Five distinct subthemes emerged from this topic. These included a strong preference for Chinese language delivery, the need for a didactic module on emotion identification, regulation and expression with cultural context appropriate to Chinese American population, and specific content addressing the acculturation challenges unique to Chinese parents in the U.S. Additionally, participants noted the importance of parental self-care as a foundation for effective parents and sought guidance on navigating co-parenting issues.

Subtheme 1. Strong Preference for Chinese Language Delivery

Language was the primary theme discussed by participants. As the majority of participants speak Chinese at home, they reported a strong preference of receiving FCUO content and coaching sessions in Chinese. Specially, one participant highlighted the potential challenge of learning skills in English while needing to translate them in Chinese with children:

> *And I guess if you speak English to your kids at home, it might be a little bit easier for them to just use the language from the app, right? But if they're trying to translate it to Chinese, then it becomes a little bit weird.*

Additionally, one participant emphasized the importance of linguistic consistency across the intervention components, naming the coaching session and the app content.

> *I am 'ok' with English but of course, I think it will be better if it is in Chinese. I don't mind speaking English with you, but I think I will feel more connected if we can speak Chinese. But if you change language you want to change both, it would be wired if we speak in Chinese but have the app in English.*

Subtheme 2. Pressing need to increase emotional competence

The discussion of language also prompted the conversation about emotion expression,

particularly regarding love and affection. While some participants reported difficulties with using praise, a number of participants highlighted the nature of *"love language"* in Chinese culture. To illustrate this, one participant noted:

> *For Chinese parents, it's more like instrumental support and instrumental love… Like I buy you this thing, I cook for you, I clean for you, I do those number of things, but I don't say 'I love you.' For Chinese parents, it's easier or it's a routine as to provide instrumental support. However, we also need emotional support. Maybe having some language to teach the parents how to express their love more directly.*

Another parent agreed with this suggestion and elaborated further on body language and the expression of love:

> *Yeah, like a body language, like my mom... rarely gave me like any hug or touches or anything. It's like Asian culture, right? But I try to hug my kids at least one time a day… and my kids, they love to hug me... I think that helps because I feel like an Asian mom [I] don't know express what love or body language or the word. That's the main area I want to change.*

Participants also recommended adding a didactic section on emotion identification, expression and regulation. Many participants expressed the desire to *"help [their] children identify emotions"* and teach them how to *"regulate their emotions."* Others highlighted the need to "*relearn and teach the proper expression to emotions in American culture."* To elaborate the cultural gap in emotional education, one participant mentioned that "*because we don't learn and talk about emotions in China, we don't know how to handle our kids when they have emotions."*

Subtheme 3. Addressing acculturation challenges of parenting between Chinese and American cultures

Another theme derived from the discussion was the challenge of navigating parenthood *"between two cultures."* Discussions ranged from supporting their children to form cultural identity to manage intergenerational cultural conflict. To illustrate the struggles, one participant

mentioned:

> *... I'm the first-generation immigrant. I was born and grew up in China and there are cultural values, [like] communication style differences. So, if you can add maybe a section or maybe a subsection under each module about… cultural differences and the value differences. Because we are also parenting while navigating our own trauma history and how we grew up. And I'm doing a different thing with my kids.*

Participants also expressed some unique challenges observed in Chinese American families, particularly regarding cultural preservation. In particular, they talk about how parental expectations might become a source of conflict. One parent noted that the pressure to maintain cultural heritage, such as attending Chinese school or learning the language, can often become a specific source of conflict between parents and children. One participant resonated with the challenge and described her struggle to adapt to American parenting norms while holding onto the rules of her own upbringing.

> *I used to send the older one back to China for half of a year and he [felt] not great. After he came back, when I tried to have some rules… He always says, "we are not in China." I know I need to learn some new parenting ways but I grew up with those rules. I cannot completely throw them away. But they [kids] grow up in here. They sometimes don't understand why we have different rules or why they have to learn Chinese.*

Recognizing that their children are growing up in a distinct cultural environment, some parents expressed a strong desire to learn *"Western parenting"* strategies. As some participants explained, learning American culture and Westernized parenting is necessary to raise their children. One parent mentioned:

> *I need to learn that because she… did not grow up in Chinese culture. So, I think it's important to let me learn about… the Western or American culture… [and] educate her in the American way, not Chinese way.*

Participants also talked about the formation of cultural identity, and that Chinese and Western cultural values have sometimes created unique parenting challenges. One participant

reflected on raising her U.S. born child in a diverse environment:

> *I feel like for me… raising my kids in the US, she's in the second gen[eration]... I was also thinking about a cultural identity for her. Like how she was growing up like with a bunch of white kids or… a diverse community, but how her cultural identity could be solid and secure... I feel like those are more like beyond the basic parenting skills.*

Expanding on this concern, other participants contrasted the value of harmony emphasized in Chinese culture with the assertiveness highlighted in the U.S. culture. One parent argued that certain Chinese values (e.g., humility) might hinder children's ability to handle discrimination in American society:

> *In our culture we might approach conflict with effort to maintain harmony. We value humble… but in America… being assertive and being direct is more valued. If you don't say it, then I don't know what's on your mind, then I don't have any responsibility. Like when that's the cultural norm, then how do you find your voice and stand up for yourself and tell someone that you're not happy, and being able to protect yourself and set a boundary… Living in America, a white-dominated culture as a Chinese, as a person of color, we experience discrimination [and] racism… and being a female of color, it's even more… we need even more skills of… how to micro-resist, how to protect ourselves, how to set our boundaries. But if our cultural background teaches us to be silent and be submissive and to be humble, then we're not equipping our kids properly to deal with life events that give them challenge.*

Subtheme 4. Guidance on navigating co-parenting issues

Despite being married, a significant number of participants reported parenting their children majorly on their own. Discussion within this subtheme centered on three key struggles: increasing paternal involvement, managing co-parenting disagreement, and navigating consensus between two households.

Regarding the paternal involvement, one participant shared her exhaustion due to partner's disengagement in parenting and traditional view of gender roles:

> *I am a very involved mom… [but] my stress is I don't have a very good partner. Sometimes I feel like I am a single parent… this will make me feel depressed and anxious. I don't know how to get him involved. Most of the time he came home and just looked at*

his phone. He feels like as a [stay-at] home mom, I don't 'work' so I need to take care of everything - clean room, hot food, well-behaved kids… He always says 'I work all day, I am tired.'… Even on weekends, I always want to take kids out for activities, and he would just let me drive alone.

Furthermore, participants found it difficult to resolved conflicts when partners engaged in contradictory behaviors. One participant described the helplessness of limiting screen time with children while her husband kept breaking rules:

I am highly restricted on the video game time and [my children] always argue with me… I just told them, "What I ask you to do, I will do it first." But my husband plays video games. So, how can I [enforce rules] … when my husband does it the other way? it's so hard… I worry about it all the time. And there's no solution at all. I cannot find any solution.

For participants co-parenting across two separate households, conflicts arose when there was lack of consistency. One participant described the challenge of enforcing rules when her partner refused to cooperate:

Dad and I have different thoughts and ways when it comes to parenting. Like, I only allow them to watch TV for one hour when they are at my home but dad doesn't care. They can do whatever at his house… A lot of things I don't think it is good for the kids, like eating junk food or playing video games with unlimited time, but he doesn't care. And [when] they come to my home, [they] feel like I have too many rules.

Subtheme 5. Strategies to manage parental stress and model self-care for children

Given the significant stress participants experienced in everyday life, they also emphasized the importance of self-care. Several participants revealed that they had yet to build relationship within the local community since most of their friends and family members still lived in China. As a result, they lacked social support and resources to establish a support system. One participant noted:

… my days are all children. I don't have time with myself and I don't have a lot social connections here because we just moved to here… some parents are very aggressive. Not

like physically, but… the words they said feel very uncomfortable… I don't have friends. I am all by myself.

Shifting the focus from the problem to potential solution, other participants highlighted the importance of self-care. One parent mentioned the necessity of resolving their own mental health issues before learning new parenting skills:

So the parents maybe need some support in sorting out their own worries, concerns, anxiety. So they could be at a more peaceful, calm place to learn to use skills.

Furthermore, participants argued that stress management is a skill that must be learned before modeling to children. One parent mentioned:

…I think you need to teach parents how to deal with stress. Some people don't know themselves so they cannot teach their kids.

Meta-inferences

Table 8. presents the joint display of the quantitative and qualitative findings of the feasibility of the FCUO with mixed methods inferences. Quantitative analyses showed positive shifts in parenting self-efficacy following the FCUO intervention, and qualitative results indicated convergence and expansion findings. Participants not only reported confidence in utilizing newly learned parenting skills but also demonstrated an increased awareness regarding specific skills they had previously overlooked. Qualitative feedback indicated that the program provided a sense of "validation" and "assurance" regarding participants' parenting abilities. Furthermore, several participants noted that the intervention helped them to learn "Western style of parenting." As a result, the integration of qualitative findings expanded upon the quantitative results by showing that participants gained greater awareness and confidence in their parenting skills and experienced a sense of validation.

Table 8. *Meta-inferences of the feasibility of the FCUO.*

Measures	Quantitative Results	Qualitative Findings	Meta-inference
Parenting self-efficacy	Increased parenting self-efficacy in confidence and importance	Participants reported feeling more empowered and confident in parenting after the FCUO. They also mentioned increased in parenting awareness.	Convergence and expansion
Parenting behaviors	Increased in means in all areas of parenting behaviors (proactive, positive parenting and limit setting); app data showed parents improved in all areas in means except Support School Success module.	Participants reported seeing positive changes in certain parenting skills while experiencing difficulties with other parenting skills.	Divergence and expansion
Family relationships	Increased in means of parent and child relationship and decreased family relationship.	Participants mentioned seeing positive changes in parent-child relationship following the program.	Convergence and expansion
Intervention usability	High ratings on intervention usability.	Participants noted beneficial FCUO features, including the coaching session as well as suggested for potential changes.	Convergence and expansion
Satisfaction level	High rating on course helpfulness and moderate-high rating of the recommendation.	Participants reported the need to add more cultural content to meet their needs while confirmed the helpfulness of the program.	Convergence and expansion

Regarding parenting behaviors, quantitative data derived from multiple sources, including pre-post questionnaires, feedback survey and app usage data, indicated improvements across different areas, notably positive parenting, limit setting and communication. Although some of these improvements did not reach the threshold for statistically significance, the increase in means from pre- to post-test indicated an overall positive trend in participant outcomes. While qualitative findings largely corroborated these benefits, they also revealed areas of divergence where participants expressed difficulty utilizing specific parenting skills due to conflicts between Western and Chinese culture values. Specifically, participants upheld the value of being a "responsible parent" by *guanjiao* (to teach and to discipline) their children and to prepare children for "future hurdle." The divergence and expansion findings underscore the overall feasibility of the intervention while highlighting a critical need to incorporate cultural content to help Chinese American parents in bridging acculturation gaps.

The integration of quantitative and qualitative data regarding family relationships demonstrated a pattern of convergence and expansion. Quantitatively, analyses showed statistically significant improvement in the parent-child relationship from pre- to post-test, alongside with a reduction in family conflict, with mean scores decreasing by .30 points following the intervention. These findings were corroborated by qualitative data, in which participants reported a number of positive shifts in the family dynamics during and after the intervention. To expand upon these results, qualitative feedback also revealed positive changes in children, such as increase in school grade and less temper tantrums, which in turn fostered a better family relationship.

Qualitative and quantitative data regarding program satisfaction confirmed each other regarding the satisfaction level of the program, with qualitative data providing expanded

information. Quantitatively, the feedback survey yielded high mean scores on the four-item scales for intervention usability (M = 4.66, SD =.51) and the qualitative data supported the survey findings. Participants highlighted specific features contributing to the usability, including "easy to use" and "teach with multimedia." Qualitative findings further expanded upon the quantitative results by emphasizing the benefit of coaching session and high level of satisfaction toward the interventionist. Moreover, participants offered constructive feedback to enhance user experience, such as the addition of "search" feature and increased flexibility regarding the structure of coaching sessions.

Consistent with the quantitative data of high rating on course helpfulness (M = 4.41, SD = .49), qualitative findings supported the quantitative results, as every participant reported acquiring specific parenting skills from the FCUO. Furthermore, qualitative insights expanded upon the quantitative data of the program recommendation. While participants acknowledged the utility, they emphasized the importance to "add and adapt" contents, specifically regarding language, emotion, and culture, to better align with the unique needs for Chinese American parents.

CHAPTER 4

DICUSSION

This is a first study to examine the feasibility and acceptability of the Family Check-Up Online (FCUO) with Chinese American families. Using a parallel convergent mixed-methods deign, this pilot study examined whether an evidence-based parenting intervention, originally developed for Western population, could be feasible and acceptable for Chinese American families. Overall, the synthesis of mixed method inferences showed convergence, divergence and expansion of finding, indicate the overall feasibility of the FCUO. Given that the primary goals of a feasibility study are to evaluate intervention acceptability, usability, and readiness for large-scale trails, current results indicate that the FCUO is suitable for implementation with Chinese American families. However, successful future implementation requires specific cultural adaptations, notably language translation and integration of culturally relevant content to address the unique needs of this population. The following synthesizes the main findings of the current study.

Overall Feasibility and Engagement Patterns

The quantitative results from this pilot study support the overall feasibility of the FCUO. The program achieved a 100% enrollment rate and an 81% retention rate among eligible participants. These high rates demonstrate that Chinese American parents are highly receptive to parenting interventions delivered through online platforms. This aligns closely with recent literature on digital health interventions tailored for Chinese immigrants. For example, Hong et al. (2023) reported an exceptional 96% retention rate in their pilot study of WECARE, a WeChat-based intervention for Chinese American caregivers. This indicates that online

interventions might help to reduce accessibility barriers, which in turn increase the engagement rate.

However, a closer examination of data revealed a unique usage pattern. Chinese American parents spend more time on the app and less time talking to the interventionist, compared to finding reported by Hails et al. (2025) with an average of 87.84 minutes of app engagement and 178.43 minutes of consultation. Chinese American parents in the current study demonstrated higher engagement time with the FCUO but utilized significantly less direct coaching support. This pattern of engagement is consistent with the literature on barriers to mental health service utilization among Asian Americans. Recent research suggests that Asian Americans continue to face barriers when utilizing mental health services due to the stigma of keeping the personal struggles within the family and the shame of "losing face" (Brewster et al., 2025; Park et al., 2023).

It is worth-noting that although Chinese American participant emphasize strong on children's academic success, participants in the current study spent the least amount of time on the Support School Success module. This find should not be interpreted as evidence that school success was unimportant to these families. Rather, qualitative feedback provided some insight that the content was deemed to be "familiar" and well-practiced area of parenting for most of the participants.

At the same time, qualitative feedback suggested that the having a culturally matched interventionist can increase participants' openness during the coaching session and improve overall engagement in the program. One parent shared that talking with someone who understood Chinese culture made them much more willing to disclose personal struggles. This aligns with the findings from Xu et al. (2025), who noted that culturally responsive providers are

essential for building trust and ensuring program acceptability among Chinese immigrant families.

Preliminary Effectiveness

Taken together, the quantitative and qualitative findings showed a similar pattern regarding the preliminary effectiveness of the FCUO, especially in the areas of parental self-efficacy and family relationships. Quantitative results showed a significant increase in overall parenting self-efficacy from pre- to post-test, while the qualitative feedback suggested that parents experienced the FCUO as a strong source of validation and empowerment.

Additionally, mean scores for the parent-child relationship showed a statistically significant increase and family conflict scores showed a decreasing trend. Qualitative reports were generally consistent with these findings, as participants reported fewer arguments and a greater sense of closeness with their children. These results are consistent with a recent FCUO study on rural families, where parents also reported statistically significant increase in parenting skills as well as self-efficacy (Hails et al., 2025). Together, these finding suggest that the FCUO may be beneficial across varied populations.

At the same time, some participants express hesitancy about referring the program to other families and raised concerns about the cultural fit of the program and practical applicability of specific parenting strategies. These mixed responses suggest that although FCUO may be a promising intervention model, it may require additional modifications to cultural fit, skills adaptation and strategies to meet the needs for Chinese American families.

Program acceptability

Participants rated the FCUO as highly acceptable, especially the use of multimedia and user-friendly design. They also noted that the bear videos were helpful because they showed

realistic parent-child interactions and made the material easier to follow. Overall, participants reported moderate to high satisfaction with the program. At the same time, the findings suggest that cultural adaptation is still needed to make the intervention a better fit for Chinese American families.

First, participants reported the strategy of ignoring contradicted with their traditional Chinese parenting values. In Western parenting models, ignoring is often used to reduce child attention-seeking behaviors. In contrast, Chinese parenting is shaped by *guanjiao*, a concept in which care and warmth are expressed through active teaching, close monitoring, and discipline (Dai et al. 2019). As a result, many participants felt that ignoring a child's misbehavior, especially in public, would be seen as irresponsible and bring a sense of shame. This cultural dissonance has also been noted in previous research. Lau et al. (2011), for instance, reported that immigrant Chinese parents found ignoring as unacceptable because they worried about loss of face when a child's misbehavior was not corrected publicly or quickly.

Second, participants reported both linguistic and cultural difficulties in using praise. Many participants described praise as "awkward" when translating the words into Chinese and noted that Chinese culture often communicates validation and affection through "instrumental love," which emphasizes caring through practical support and resources. This finding also aligns with previous research on Chinese American families, in which Chinese American mothers often avoid direct praise but express love through support and responsibility for children (Wu & Chao, 2011). When it comes to utilizing praise, researchers find that immigrant Chinese parents in the parenting program often struggled to do so, even though they understood the concept (Lau et al., 2011).

Participants also provided clear feedback on how to improve the program's acceptability and to increase their confidence and willingness in recommending the program to other Chinese families. The most frequently mentioned recommendation was that both app and coaching sessions be offered in Chinese. They also suggested deeper cultural adaptions including stronger support for emotion coaching, attention to acculturation-related stress, inclusion of parental self-care and co-parenting concerns, and culturally responsive framing of parenting strategies such as praise and ignoring.

Beyond its preliminary findings on feasibility and acceptability, the present study is important because it fills a meaningful gap in the literature on culturally responsive parenting interventions. Although the FCUO has shown its effectiveness on diverse cultural groups in prior studies, it had not previously been examined with Chinese American families. As mentioned in the introduction, Chinese American parents may hold cultural values, parenting beliefs, and relational expectations that are not fully reflected in parenting interventions developed from Western parenting frameworks. As a result, this study not only examined whether the intervention works for Chinese American families but also identified how the FCUO can be modified to better serve this population.

Limitations

Several limitations should be acknowledged when interpreting the findings of this pilot study. First, the use of paired sample t-test in this small pilot sample represent a methodological limitation. T-test rely heavily on distributional assumptions and the small sample size (N=17) has limited the statistical power of quantitative analyses. As a result, it was difficult to detect significant effects, and statistical inference should be interpreted with caution and with the focus on preliminary trends (Kim & Park, 2019). Given the small sample size, Wilcoxon signed-rank

tests, a nonparametric sensitivity analysis to pre- to post-intervention changes, were considered to be a better approach. Wilcoxon signed rank tests examine whether the distribution of paired differences is center around zero using the ranks of the absolute differences. The approach is appropriate when sample sizes are small, in which it may provide a more conservation assessment of changes in this pilot study (Meek et al., 2007).

Second, the findings should be interpreted in light of the sample's limited representativeness. Participants were recruited through convenience sampling and were mostly female (87%), highly educated, and relatively affluent. This sample may not reflect the broader Chinese immigrant population, especially families facing greater economic, language, or access barriers. In addition, all participants identified as first-generation Chinese immigrants, which may further limit the generalizability of the results. First-generation immigrants often maintain stronger ties to their heritage culture and may experience greater acculturation-related stress than later-generation Chinese Americans (Wang et al., 2021). As a result, the struggles participants experienced with Western parenting skills, such as praise and ignoring, may be especially salient for this group. These findings may not fully reflect the parenting beliefs, experiences, or program needs of Chinese American families who are more acculturated to the mainstream culture.

Third, this study did not include a standardized quantitative measure of acculturation. This is an important limitation because prior research suggests that acculturation may shape how individuals from ethnic minority groups engage with and respond to psychological interventions (Sun et al., 2021). Although the qualitative focus group discussions offered some insight into participants' cultural experiences, the lack of a standardized quantitative measure of acculturation limited the study's ability to examine whether the variation in acculturation levels influenced program acceptability or intervention outcomes.

Finally, because this was a pilot study, only short-term outcomes were examined. Although changes in cognitions, such as parenting self-efficacy and parenting belief, can occur relatively quickly, changes in parenting behaviors and family dynamics often take longer to manifest. A longer follow-up period would therefore be necessary to determine whether the intervention produces sustained effects on parenting self-efficacy, parenting behavior, and family relationship quality.

Implications and Future Directions

Suggestions for FCUO Modifications

Findings from this pilot study suggest several areas in which the FCUO could be modified to better support Chinese American families. Prior research on the Family Check-Up model has shown that the intervention is designed to be flexible and adaptable to the needs of different families and contexts (Ghaderi et al., 2018; Bennett et al., 2025). Consistent with this framework, the present findings identified opportunities to further tailor the FCUO to meet the cultural experiences and parenting needs of Chinese American parents. To improve the cultural sensitivity of the FCUO for Chinese American parents, the program will likely require both surface-level and deep-structure modifications (Bernal et al., 2009).

At the surface level, a key step would be to translate the intervention into Chinese and provide coaching sessions in the same language. According to the Pew Research Center (2024), only 46% of Chinese immigrants in the United State speaks English proficiently, leaving more than half of the population experience potential language barriers. Existing research further suggests that linguistic and cultural adaptation can improve the effectiveness of digital psychological interventions for Chinese populations (Tian et al., 2023; Pan & Rafi, 2025). As a

result, offering the FCUO in Chinese may help to reduce potential language-related barriers and improve accessibility for a wider range of Chinese American parents.

However, research adapting parenting interventions for Chinese immigrant families suggests that simply translating materials is insufficient**;** the intervention must also be adjusted at the level of cultural meaning (Wei et al., 2024; Magaña et al., 2021; Lau et al., 2011). Bernal and colleagues' (1995) ecological validity model offers a helpful framework to address culture sensitivity of interventions by identifying eight dimensions of cultural relevance: language, persons, metaphors, content, concepts, goals, methods, and context. Applied to the FCUO, this would involve using culturally appropriate language and incorporating familiar Chinese idioms, metaphors, and examples that reflect the lived experiences of Chinese American families. For example, video demonstration could portray typical immigrant family conflicts, such as disagreements about academic performance or tension around preserving Chinese cultural values across generation (Furlong & McGilloway, 2015).

The delivery format should also be adapted in ways that reflect cultural preferences for learning and engagement. Prior telehealth parenting interventions indicated that Chinese parents tend to value remote formats that offer flexibility, video demonstrations, and the opportunity to learn skills at home (Zhou et al., 2022). Similarly, self-directed digital parenting programs have shown to improve parenting practices and parent–child relationships among Chinese migrant families (Wang et al., 2024). Taken together, these findings suggest that the FCUO may benefit from including culturally matched interventionists while offer a more flexible and individualized coaching structure that accommodates parents' varying levels of comfort with professional support.

Participants also noted several technological barriers that impacted their engagement with the program. To improve usability, future versions of the FCUO should address mobile compatibility issues, including the reported blank-page error. Additional features may also be beneficial to participants, including a search function that allows parents to review specific parenting strategies and a customize push notification feature that remind parents of their unique parenting goals.

The present study also points to the need for deeper curricular adaptations to better support Chinese American families. First, for Chinese American parents who viewed praise and ignoring as inconsistent with Chinese cultural values, the FCUO may need to reframe these skills in ways that are more culturally appropriate. For example, praise may be better accepted for parents when presented as a way to encourage motivation and perseverance rather than as simple verbal affirmation (Lau et al., 2011). The intervention could also encourage parents to combine verbal validation with instrumental care (Kong & Au, 2018). Similarly, ignoring may need to be explained as a brief strategy for removing attention from misbehaviors, followed by correction and clear expectations (Lau et al., 2011).

Second, the findings suggest a need for stronger attention to emotion coaching. Research on Chinese American families indicated that parental emotion socialization plays an important role in children's emotional development. At the same time, Chinese American parents have been found to show less overt emotional expression compared to their Western counterparts (Curtis et al., 2020; Chen et al., 2015). Thus, cultural adaptation to the FCUO could include a section on emotion coaching aiming to strengthen parents' socioemotional competence. Such content might focus on helping parentings to identify emotions, respond to children's emotional needs, and support emotion expression and regulation in culturally appropriate ways.

Third, participants expressed a need for support in managing acculturation stress. Previous research on parenting intervention for immigrant families has incorporate content related to immigration challenges, culturation differences in parenting expectations, and parent-child acculturation gaps (Bornstein, 2017; López-Zerón et al., 2020). In light of these findings, adaptation of the FCUO could include psychoeducation about the acculturation process, strategies for coping with stress, guidance for managing intergenerational cultural conflict, and support for navigating cultural and racial discussions with children, including conversation about microaggression and racism (Kim et al., 2013; Ying, 2009).

Fourth, immigrant parents may experience substantial psychological stress related to migration and cultural adjustment, and this stress may impact their parenting abilities. The literature shows that parental empowerment and social support can significantly reduce parental perceived stress (Park et al., 2025; Boruszak-Kiziukiewicz & Kmita, 2020). Future versions of the FCUO should include modules that address parental well-being, including psychoeducation about stress, practical self-care strategies, and opportunities for connection and community support.

Finally, participants raised concerns about co-parenting and differences in discipline across caregivers. This concern is especially relevant in Chinese and Chinese American families, where mothers carry the primary responsibility for childcare, while fathers may be less involved or take on more traditional authority roles (Li, 2020; Zou et al., 2019). Studies with Chinese immigrant families have shown that lower paternal involvement is associated with higher maternal parenting stress (Zhang et al., 2023). In addition, grandparents often play an active role in childcare in Chinese American households. Although this support can be valuable, research suggests that intergenerational caregiving can lead to power struggle and conflict between

parents and grandparents (Xiao, 2016; Xu et al., 2018). Hence, future iterations of the FCUO would benefit from including guidance on negotiating parenting roles, increasing paternal involvements, and managing disagreement about parenting practices across caregivers or households.

Implication for Research

Future research should continue to examine the feasibility and effectiveness of the FCUO with Chinese American families. One important next step is to include validated measures of acculturation to better understand how acculturation may shape parents' response to the program. Including a measure of acculturation would allow researchers to explore whether parents with different levels of acculturation interpret the intervention differently, and whether certain components are more useful or culturally congruent for particular subgroups of families.

Another important direction is to evaluate the revised FCUO in a fully powered randomized controlled trial (RCT) after incorporating the technological, linguistic, and curriculum modifications identified in this study. Future studies should recruit a larger and more diverse sample with greater variation in gender, socioeconomic status, family background and acculturation. A larger sample is necessary to evaluate whether the intervention is effective for the majority of Chinese American population.

Finally, future studies would benefit from using longitudinal designs with 6- or 12-months follow-up assessment. Such design would help determine whether the increases in parenting confidence observed in this pilot study translate into sustained improvements in parenting practices over time. Longer-term follow-up would also allow researchers to examine whether the intervention has lasting effect on reducing parent-child conflict and improving family relationships.

Conclusion

This is the first study to evaluate the acceptability and feasibility of the Family Check-up Online (FCUO) with Chinese American families. The findings suggest that this strength-based parenting intervention may be a feasible and acceptable approach for this population. Participants demonstrated high level of engagement, reported moderate to high level of satisfaction, and showed positive changes in parenting self-efficacy, parenting behaviors, and family relationships. Although these findings are preliminary, they provide early support for the potential value of the FCUO with Chinese American families.

At the same time, the mixed-method findings highlight several cultural limitations in the current version of the FCUO. In particular, participants reported that parenting strategies, such as praise and ignoring, did not align well with their cultural values and parenting beliefs. They also expressed the importance of language accessibility and emphasized the need for content that could address the everyday experiences of immigrant parents, such as acculturation-related stress, emotion coaching, self-care and co-parenting challenges.

These findings suggest that future versions of the FCUO should be modified to better reflect the needs and experiences of Chinese American families. Participants offered specific suggestions for improving both the content and the technology, and these recommendations provide a useful starting point for future adaptation. With these changes, the FCUO may become a relevant and accessible resource for Chinese American parents.

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APPENDIX A

RECRUITMENT FLYERS

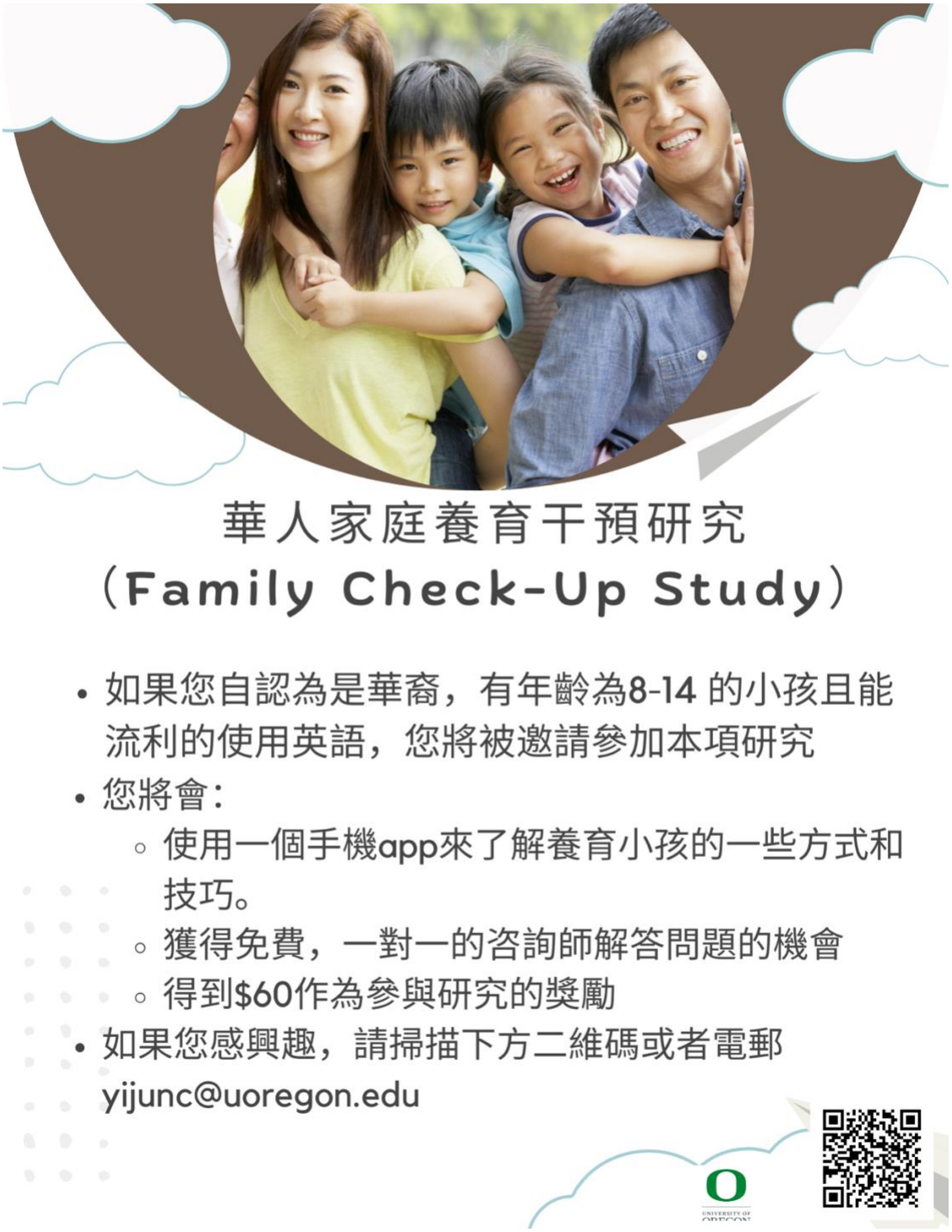
Figure 2. Recruitment flyers - English version



Family Check-Up Study for Chinese American Families

- For Chinese American parents of youth ages 8-14.
- Parents will use an app designed to provide tips to strengthen family functioning and improve parenting self-efficacy and skills in building positive relationships with their children.
- Parents will have the opportunity to receive free, private, one-on-one support from a parenting coach over the phone or Zoom.
- Parents will be paid up to $60 for their participation in research.
- If you are interested, scan the QR code or contact yijunc@uoregon.edu

Figure 3. Recruitment flyers - Chinese version



APPENDIX B

SCREENING QUESTIONS

	Yes	**No**
1. Do you have a child aged 8-14?		
2. Are you his/ her legal guardian?		
3. Do you have a smartphone with text messaging capability and access to email?		
4. Are you fluent in spoken and written English?		
5. Are you currently living in the U.S.?		

APPENDIX C

CONSENT FORMS

STUDY CONSENT FORM

Consent for Research Participation

Title: Pilot Study: The feasibility and acceptability of the Family Check-Up online among Chinese American families

Researchers(s): Yijun Cheng, M.A.

Janice Tung, B.A.

Beth Stormshak, Ph.D.

Research contact info: Yijun Cheng, yijunc@uoregon.edu

You are being asked to participate in a research study. The box below highlights key information about this research for you to consider when making a decision whether or not to participate. Carefully consider this information and the more detailed information provided below the box. Please ask questions about any of the information you do not understand before you decide whether to participate.

Key information for you to consider
• **Voluntary Consent.** You are being asked to volunteer for a research study. It is up to you whether you choose to participate or not. There will be no penalty or loss or benefits to which you are otherwise entitled if you choose not to participate or discontinue participation. • **Purpose.** The purpose of this research is to test a web-based parenting curriculum called the Family Check-Up Online among Chinese American families. The goals of this curriculum are to improve family functioning and help caregivers' parenting build better relationships with their children by providing support and information. This curriculum is designed for parents and caregivers of middle-school aged youth to reduce stress, improve parenting skills, and enhance children's school-related behaviors. • **Duration.** It is expected that your participation will last approximately 7 hours over 3 months.

- **Procedures and Activities**. You will be invited to participate in the following activities:
    - Surveys and Interviews:
        - Parent/ Caregiver Surveys: You will be asked to complete two private surveys, one at the beginning of the study, and one after completing the FCU online intervention. You may choose to complete these surveys on a computer or have an interview with research staff over the phone or Zoom. Each survey would take about an hour to complete. The surveys ask questions about your background, your family, your child's abilities and behavior, and how you parent your child. Moreover, your child's name will be collected for research purposes.
        - You will be paid $50 for completing both surveys. This payment will be paid via check.
    - FCU Online: You will be asked to use the FCU Online app on your smartphone. The app will help you to think about parenting and practice new skills. It covers topics like healthy behavior for stressful times, positive parenting, rules and consequences, supporting school success, and positive communication.
    - Telehealth Support from a Family Consultant: A Family Consultant will help you set goals and use the FCU Online App. They will communicate with you through phone calls, texts, or Zoom check-ins. You will complete check-in appointments with your Family Consultant for each of the 5 topics in the FCU Online. Each check-in will last about 20 minutes and will be recorded to assess how well the Family Consultant follows the Family Check-Up model during their work with you.
    - FCU Online Feedback Survey: Once you finished using the FCU Online app and had check-in appointments with your Family Consultant, you will be asked to complete a short survey. This survey will ask your thoughts and feelings about the web-based application and the support you received from your family consultant. It should take around approximately 10 minutes to finish.

- **Risks.** Some of the foreseeable risks or discomforts of your participation include feeling uncomfortable answering some questions in the surveys or talking with your Family Consultant. You can choose not to respond to questions in the surveys. There is also a small risk that your private information could be exposed. However, we take measures to protect your privacy and prevent this from happening.
- **Benefits.** Some of the benefits that may be expected include enjoying thinking about parenting and practicing new skills. You may enjoy talking to your Family Consultant about your goals and getting support on parenting.
- **Alternatives.** Participation is voluntary and the only alternative is to not participate.

Who is conducting this research?

The researchers, Yijun Cheng, M.A. and Janice Tung, B.A. are asking for your consent to this research. Dr. Beth Stormshak will be providing supervision to both researchers' clinical and research work through the University of Oregon.

Why is this research being done?

The goal of this study is to test how effective a web-based parenting curriculum (the Family Check-Up Online) is for Chinese American parents. You are being asked to participate because you are the parent or legal guardian of a child between the ages of 8 and 14. About 30 families will take part in this research.

How long will I be in this research?

We expect that your participation will last approximately 7 hours over 3 months. This includes time spent completing two surveys, using a web-based application (FCU Online), and participating in five check-ins with a family consultant.

What happens if I agree to participate in this research?

If you agree to participate in this research, your participation will include:

- **Baseline surveys:** You will be asked to finish a survey that takes about 45 minutes to an hour to complete. You will have a choice to complete this survey using your own computer or have an interview over the phone or Zoom. The surveys ask questions about your background information, your family, your child's abilities and behavior, and how you parent your child.
- **Follow up surveys:** To help researchers understand how families may change after using the FCU Online program, you will be asked to complete follow up surveys or interviews that are same to the initial surveys. You will be asked to complete these surveys after you have finished using the FCU online. Each survey will take about 45 minutes to an hour to complete. After you have used the FCU Online app and completed check-in appointments with your Family Consultant, you will be asked to complete another survey. This survey will ask your thoughts and feelings about the web-based application and the support you received from your family consultant. This survey will take about 10 minutes to complete.

The research project is being conducted remotely, which means that all research activities will be done online or over the phone. During surveys interviews, you may skip any question that makes you uncomfortable. You may stop participating at any time.

What happens to the information collected for this research?

Information collected for this research will be used to test the effects of the FCU Online program on parenting skills, parenting self-efficacy and family functioning. You or your child's name will not be used in any reports or conference presentations about this study.

Identifiers might be removed from identifiable private information collected in this research. After removal of identifiers, the information may be used for future research or distributed to another investigator for future research without obtaining additional consent.

How will my privacy and data confidentiality be protected?

We will take measures to protect your privacy. Measures we will take include:

- Conducting interviews and check-ins using a HIPPA-compliant Zoom account issued through the University of Oregon

We will take measures to protect all your personal information, but we can never fully guarantee confidentiality of all study information. Measures we will take include:

- Training our staff conducting phone/Zoom interviews and check-ins to protect participant privacy;
- Storing consent forms, surveys collected via Qualtrics, and video recordings of sessions with Family Consultants on our secure server;
- Strictly limiting access to our secure server to authorized research staff involved in the project;
- Not including participants' identifying information on surveys or recordings, instead assigning a unique family ID number;
- Recording directly to a university-owned computer (not the cloud) and storing them in a password protected file on a secure server; and
- Using audio/ video recordings for research purposes only. We will not use recordings for other purposes without your written consent.

Individuals and organization involved in this research may have access to and review the research records. This may include access to your private information. These individuals and organizations include: the Institutional Review Board that reviewed this research, the study sponsors, and the research team.

We protect your information from disclosure to others to the extent required by law. We cannot promise complete secrecy. It is important to understand that if there is a risk of serious harm to yourself or other, the researchers may take necessary steps to prevent such hard. Those steps include reporting the situation to appropriate authorities.

The research team includes individuals who are mandatory reporters. If the research team has reasonable cause to suspect abuse or neglect of a child or adult, a report may be required under Oregon State Law. In such a case, confidentiality may be reached, and personal information may be disclosed.

If you want your research information released to an insurer, medical care provider, or any other person unrelated to the research, you must provide consent to allow the researchers to release it.

What are the risks if I participate in this research?

There may be risks of stress, emotional distress, inconvenience, and possible loss of privacy and confidentiality associated with participating in a research study.

What are the benefits of participating in this research?

We cannot promise any benefits to you or others from your participation in this research. However, possible benefits to you include enjoying thinking about parenting and practicing new skills. You may also enjoy talking to your Family Consultant about your goals and getting support on parenting.

What if I want to stop participating in this research?

Taking part in this research study is your decision. Your participation in this study is voluntary. You do not have to take part in this study, but if you do, you can stop at any time. You have the right to choose not to participate in any study activity or completely withdraw from continued participation at any point in this study without penalty or loss of benefits to which you are otherwise entitled. Your decision whether or not to participate will not affect your relationship with the researchers or the University of Oregon. If you decide to leave this research, please contact the research team so they can delete your survey/ interview data and any recordings of sessions with family consultants. Please note that if data has already been de-identified, and there is no connection between identifiers and the assigned family ID number, we may not be able to delete your data.

Will I be paid for participating in this research?

As a participate in this research, you may receive up to $60. You may receive $50 from participating in the intervention and additional $10 from attending the focus group after the completing the intervention. The payment will be sent to you by check, which will be mailed within one week after receiving your completed surveys. Please note that compensation for participation in research studies may be considered taxable income. The University requires tracking for compensation that is paid to you. This may include your name and contact information. This information is stored confidentially and separate from research data. If you receive $600 or more in a calendar year, you may be contacted to provide additional information (e.g., social security number) for tax reporting purposes.

Who can answer my questions about this research?

If you have questions, concerns, or have experienced a research related injury, contact the research team at:

Yijun Cheng, the primary investigator

917-374-3574

yijunc@uoregon.edu

An Institutional Review Board ("IRB") is overseeing this research. An IRB is a group of people who perform independent review of research studies to ensure the rights and welfare of participants are protected. UO Research Compliance Services is the office that supports the IRB. If you have questions about your rights or wish to speak with someone other than the research team, you may contact:

Research Compliance Services

5237 University of Oregon

Eugene, OR 97403-5237

(541) 346-2510

ResearchCompliance@uoregon.edu

STATEMENT OF CONSENT

I have had the opportunity to read and consider the information in this form. I have asked any questions necessary to make a decision about my participation. I understand that I can ask additional questions throughout my participation.

I understand that by signing below, I volunteer to participate in this research. I understand that I am not waiving any legal rights. I have been provided with a copy of this consent form. I understand that if my ability to consent or assent for myself changes, either I or my legal representative may be asked to re-consent prior to my continued participation in this study.

Please enter your full name below.

_____

Please sign your name using the mouse.

_____

Please enter today's date:

_____

As described above, you will be video recorded while receiving parent/caregiver coaching sessions with the family consultant. Recordings will only be used to monitor the family consultant's fidelity to the research model and will be destroyed at the end of the project.

Please enter your initials in the space below if you consent to the use of video recording as described.

_____

Focus Group Consent Form

Consent for Research Participation

Title: Pilot Study: The feasibility and acceptability of the Family Check-Up online among Chinese American families

Researchers(s): Yijun Cheng, M.A.

Janice Tung, B.A.

Beth Stormshak, Ph.D.

Research contact info: Yijun Cheng, yijunc@uoregon.edu

You are being asked to participate in a research study. The box below highlights key information about this research for you to consider when making a decision whether or not to participate. Carefully consider this information and the more detailed information provided below the box. Please ask questions about any of the information you do not understand before you decide whether to participate.

Key information for you to consider
• **Voluntary Consent.** You are being asked to volunteer for a research study. It is up to you whether you choose to participate or not. There will be no penalty or loss of benefits to which you are otherwise entitled if you choose not to participate or discontinue participation. • **Purpose.** The purpose of this research is to receive feedback and opinions about the content, structure and cultural adaptation of a web-based program designed for Chinese American parents of middle school-aged youth. • **Duration.** It is expected that your participation will last 90 minutes. • **Procedures and Activities.** You will be asked to participate in a focus group of up to 8 individuals. In this group, you will provide your opinion and feedback about the app's usefulness and relevance. You will be asked if the content is helpful with your parenting behaviors and values. You will also be asked for your ideas on how to make the content more relevant and tailored to Chinese American population. The focus

group will be audio recorded. By consenting to apart of this research, you are consenting to be audio recorded.
- You will be paid $10 for participating in the focus group via check.
- **Risks.** Some of the foreseeable risks or discomforts of your participation include feeling uncomfortable answering some questions. You can choose not to respond to questions during the focus group. There is also a risk that your private information could be revealed. However, we take precautions to guard against this.
- **Benefits.** Some of the benefits that may be expected include enjoying thinking about parenting and practicing new skills. Researchers will also gain insights from these focus groups. It will improve the usefulness of the Family Check-Up Online among Chinese American population.
- **Alternatives.** Participation is voluntary and the only alternative is to not participate.

Who is conducting this research?

The researchers, Yijun Cheng, M.A. and Janice Tung, B.A., who are affiliated with the University of Oregon, are asking for your consent to this research.

What happens to the information collected for this research?

Information collected for this research will be used to improve the content of the mobile app designed for Chinese American parents with children aged between 8 -14. Your name will not be used in any reports or conference presentations about this study.

Identifiers might be removed from identifiable private information collected in this research. After removal of identifiers, the information may be used for future research or distributed to another investigator for future research without obtaining additional consent.

How will my privacy and data confidentiality be protected?

We will take measures to protect your privacy. Measures we will take include:

- Using a HIPAA-compliant Zoom account issued through the University of Oregon to conduct the focus group;
- Training staff conducting the focus group to protect participant privacy;
- Asking you to temporarily change your name in your Zoom profile so that only your first name appears in your “box”;

- Asking focus group members to only use first names when speaking to each other to help protect each other's confidentiality; and
- Asking focus group members to respect each other's privacy and not share information revealed in the focus group with people not currently present.

Despite taking steps to protect your privacy, we can never fully guarantee your privacy will be protected. We will take measures to protect the security of all your personal information, including:

- Not including participants' identifying information on recording, instead assigning a unique group identification number;
- Recording directly to a university-owned computer (not the cloud) and storing them in a password protected file on a secure server; and
- Using audio/ video recordings for research purposes only. We will not use recordings for other purposes without your written consent.

Individuals and organizations that conduct or monitor this research may be permitted access to and inspect the research records. This may include access to your private information. These individuals and organizations include: the Institutional Review Board that reviewed this research, the study sponsors, and research members.

What if I want to stop participating in this research?

Taking part in this research study is your decision. Your participation in this study is voluntary. You do not have to take part in this study, but if you do, you can stop at any time. You have the right to choose not to participate in any study activity, or completely withdraw from continued participation at any point in this study, without penalty or loss of benefits to which you are otherwise entitled. Your decision whether or not to participate will not affect your relationship with the researchers or the University of Oregon.

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Please enter your full name below.

_____

Please sign your name using your mouse.

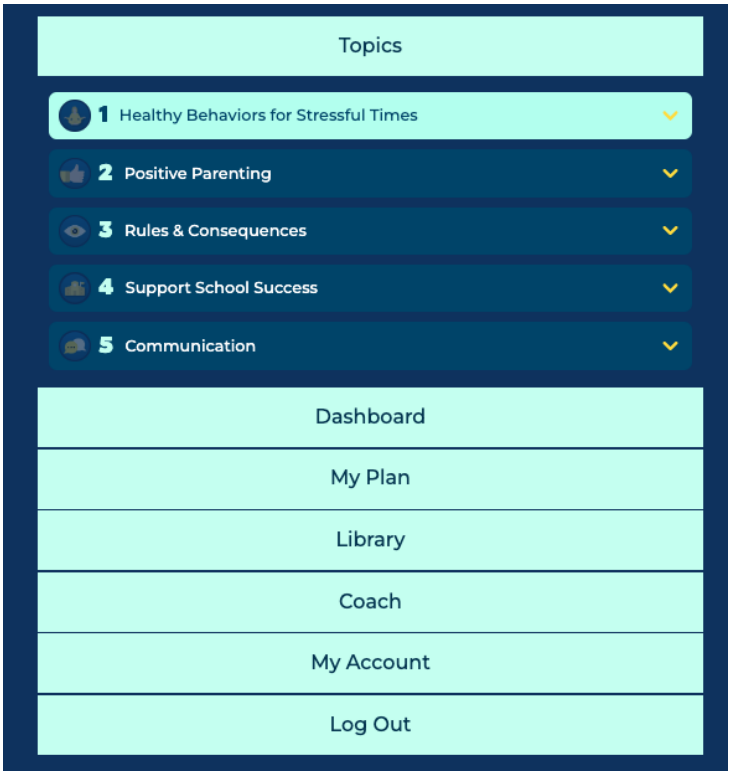
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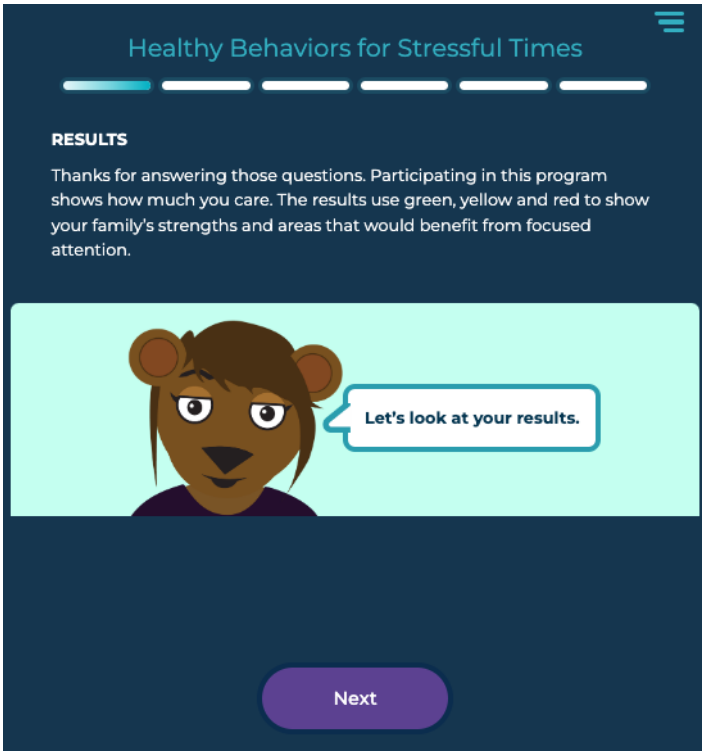
Please enter today's date:

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APPENDIX D

Figure 4. FCUO *i*ntervention *s*cree*n*shot





APPENDIX E

FOCUS GROUP QUESTIONS

Feasibility:

- What were some obstacles you faced trying to access the FCU online?
- What made it hard to engage with FCU Online?
- Were there any challenges accessing the app through the link provided?
- Tell me your experience navigating the modules, specifically the videos and interactive activities?
- How easy was it to get in contact with your family consultant?
- Was the language used in the app easy to understand or defined enough to be understood? Would the content be more accessible if it was written in Chinese (Mandarin/Cantonese)? Elaborate your answer.
- How could we make the app more accessible for people who struggle with the use of technology?

Acceptability:

- What aspect of the FCU online program did you find the most beneficial? Least beneficial?
- Was the content presented something you could see yourself applying to your parenting why or why not?
- Are there everyday parenting challenges you face that were not addressed in the modules? If so what are they?
- Were the scenarios and solutions presented throughout the modules relatable to your experiences? Did the solutions feel attainable?

- Was the coaching beneficial in applying the strategies presented in the app?
- On the scale from 1-10, how likely would you recommend the FCU online to other Chinese American families?
- Does the content materials match with your parenting values and beliefs? If not, what other content should be included?

APPENDIX F

EXAMPLE CODE FROM THE CODEBOOK

Code PROGRAM-ACCEPTABILITY	
Level	2
Links to	PROGRAM-FEEDBACK (Level 1)
Short Definition	Acceptability of the program
Full definition	Text indicating whether the program felt appropriate, relevant, or recommendable to participants.
When to use	Use for statements about fit, usefulness, willingness to recommend, or overall satisfaction.
When not to use	Do not use for comments about a specific skill, module, or coaching process.
Example(s)	“I think I always feel like this kind of tool is really helpful to maybe give a little bit of ah, you know, breeze moment for all the parents.”