



Bachelor Thesis:
The Pathway and a Selection of Student Reports



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Editor: Ho Kit-wan



Gratia Christian College
宏恩基督教學院

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The Pathway and a Selection
of Student Reports**

Gratia Christian College

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Foreword

Gratia Christian College was established in 2015, and there are four bachelor's degree programs offered by the College. Among all the degree programmes, they have one course in common: the Honours Project. This course affords students, under the coaching of the College's faculty, an opportunity to learn and work towards the production of a research report. Through the student-oriented learning process, the students involved are expected to be able to deepen their grasp and understanding of a particular discipline, familiarize themselves with relevant knowledge and techniques in collecting information and interpreting data, acquaint themselves with the knowhow for addressing certain research question(s) in mind, and sharpen their receptors for taking in new data, information and knowledge for an effective grasp of the latest development in relation to their field of study.

In general, students might initially be hesitated to conduct the Honours Project for its demandingness in focus, persistence, and time. Upon their project completion, they will, however, feel empowered and endowed with better problem-solving skills, greater confidence in addressing problems, as well as competency in researching, finding clues for knotty issues, and making new discoveries on their own, resulting in a sense of self-achievement. This would encourage and enhance students' independence and self-drive in their quest for knowledge and solutions to problems encountered in life, which is fittingly described in the Chinese self-generating process of Xuewen (學問) and crucial to their future development in education, career, and life.

To better equip students with the necessary knowledge and skills required in mastering the Honours Project in their fourth year of study, prerequisite courses like Statistics and Social Research Methods would help them lay a solid foundation of the research techniques required in Honours Project. Meanwhile, workshops and seminars on research-related skills are also necessary components of the Honours Project course. All students will

be assigned a supervisor to guide them in the whole process of preparation of a research proposal to report on the respective topics they have decided on.

When compared with other courses generally offered in a Degree programme, additional manpower and financial resources may be needed for carrying out the intensive activities of the Honours Project. With the readiness of the Research Matching Grant Scheme initiated by the Government, financial sponsorship for research work conducted by staff and students is made possible. We are delighted to find that students' research outputs through the Honours Project may contribute to shedding light on certain knowledge, raising questions and concerns for social service and policy and pointing out some implications for the society.

In response to Dr. Helen Ho's suggestion of cultivating an atmosphere conducive to kindling research interests and knowledge sharing through compiling a book with some research reports from students and staff, the College is delighted and ready to finance the cost of publishing the book with funding from the Research Matching Grant Scheme. I hope this book could appeal to both students and staff that they would contribute their research results, which would subsequently usher in a research ambience under which staff and students become increasingly interested in conducting research, making a quest for new knowledge and sharing their findings with peers in Gratia.

May I take this opportunity to express my deep appreciation for the toil and sweat of Dr. Ho, the colleagues and students involved, which enable this publication to come into being.

Dr. Chui Hong-sheung, BBS, JP, President

Foreword

Professionals collaborate by selflessly sharing their practical knowledge and working experience. Books, manuals, conferences promote sharing, primarily through which we improve our quality of work.

Similarly, it is equally important to keep ourselves closely informed of our work environment through gathering new data or evidences, i.e., the difficulties and feedback from our service users, the causes of these challenges and the possible ways to sort things out. Indeed, we need to get in touch more often with our service users so as to make fitted plans and serve better. Research plays a vital role in professional practice.

Thus, when Dr. Helen Ho suggested to publish a book with contributions from students' Honours Projects and the research studies of the teaching staff, all our colleagues unanimously agreed and supported. This book being the first one of its kind that the Gratia Christian College has launched, I longingly hope that more of this is to come, while valuable views and insights of practical knowledge will be shared and discussed.

Readers will find in this book four reports from students' Honours Projects. Among the four projects, two are about the caregivers - their quality of life and their perception of their roles in family. The informal caring system is a major caring source, but the familial caregivers in Hong Kong cannot receive the necessary support most of the time. How would they see their own role in the helping process? How have their own lives been affected by the caring burden? How can we help? All these concerns have implications on our service development. E-sports is another interesting topic. There are different views about this in the society. Among our young people, it is more than a game. It could be an opportunity for career development, a channel to communicate with others, as well as a way to develop themselves. Children development has always been our primary concern. How parental styles affect children's behaviour and mindset is a crucial factor demanding our attention and review from time to time.

Students working on these four projects have demonstrated their efforts and sincerity in research and service review. We hold their contributions to this book in high regard.

Dr. K.C. Wong and Dr. K.C. Li have kindly made respectively their inputs qualitatively and quantitatively. Their professional views should be attended to and thoroughly deliberated for digging up new insight.

In short, I congratulate Dr. Helen Ho on producing a piece of wonderful academic work.

Dr. Mark Li Kin-yin
Head, School of Social Work

Preface

The Honours Project is a significant component as well as a prerequisite for graduation from the Bachelor of Social Work (Honours) [BSW (Hons)] Programme. The Honours Project is seen as a capstone project that asks for Social Work students' integrating ability of their learning from the taught courses and experiences in field practicum.

Each student has to complete an empirical/theoretical research by the end of the fourth year of their study. Through an empirical research, the student conducts an original quantitative or qualitative research and gains more exposure in research design, data collection, analysis and interpretation. For a theoretical research project, the student collects, analyzes, integrates and evaluates the data/evidence available in an attempt to put forth new interpretations and hypotheses.

During the research process, each student has to develop an in-depth and independent study on a selected social work issue and/or practice. They are expected to demonstrate their abilities in undertaking rigorous academic enquiries, critical analysis and reflections, as well as developing some original ideas in the focused area. Throughout the whole process, each works independently, with the support and guidance afforded by respective Honours Project supervisors from among faculty members or specially recruited from qualified and experienced social work practitioners. Under such one-to-one supervision, each student is to formulate their own research questions, design the proposal, collect and analyze the data, and compile their individual research report.

It is indeed a vigorous and demanding academic inquiry. So far, most of the students can finish the project within the timeline whereas only a few require a little bit more time for completion. Our school had its first intake in 2015, and the first round of Honours Projects took place in the academic year 2018-19. Four Honours Projects selected from three cohorts of students have been included in this book. Their supervisors and the editor have been

engaged to help polish their English while our librarian has kindly aligned their referencing format before publication. Thus, we are specially indebted to Dr. Mark Li, Dr. K.C. Wong, Dr. K.C. Li, and Ms. Elaine Lam for bringing out this book.

Apart from the students' projects, Dr. K.C. Wong and Dr. Kim Li have been invited to write two articles on research methodology respectively, which provide a good reference for students going to prepare their Honours Projects in the days to come.

Dr. Helen Ho Kit-wan
Program Director, BSW

Part One:
Selected Student Honours
Project Reports





Gratia Christian College
宏恩基督教學院

Quality of Life of Epilepsy Caregivers: Caregiving Stress and Epilepsy Caregiver Support Services in the Hong Kong Context

An Undergraduate Honours Project

Submitted to

Dr. Wong Kam Chung

Gratia Christian College

Hong Kong

In partial Fulfillment of the Requirements for the
Degree of Bachelor of Social Work (Honours)

BY

CHAN HOI YAN

April, 2019



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Abstract

Background

In Hong Kong, burden of caregivers of persons with epilepsy constitutes a huge understudied area and related researches are long overdue. This study attempts to identify the stressors, its effects and the coping methods of the caregivers of persons with epilepsy.

Methods

This research undertook a comprehensive assessment of caregiving burden and difficulties associated with informal caregiving to persons with epilepsy with mixed methods of data collection and analysis. Familial caregivers of 38 persons with epilepsy completed questionnaires providing demographic data, health situation, and burden information of themselves (N=43). The researcher assessed the caregivers' burden using the Chinese version of Zarit Caregiver Burden Inventory (ZCBI). Two caregivers and a former staff of the epilepsy-related agency were invited to express the difficult aspects of epileptic caregiving experience in semi-structured interviews. Basing on their responses and reflection of their life stories, the researcher located the current service gap between social policy and formal social services.

Results

The familial caregivers' total scores in ZCBI ranged from 31 to 74. Most of them felt moderate to severe level of caregiving burden (N=38; M=58.37; SD=11.01). Two factors, "Sacrifice and Strain" and "Inadequacy", were found as significant contributing to their caregiving burden. A high positive correlation between "Caregiving Time Spent" and caregiver ZBI score was found.

Conclusions

The collection and analysis of quantitative and qualitative data enabled the researcher to explore better the complexities of caregiver burden in epilepsy. The result of both types of data reported caregivers' experienced stigmatisation, finances and other stressors. These stressors mostly influence caregivers' emotional well-being, family and social life, etc., bringing troubles which need the right coping strategies to deal with. The implication of caring for persons with epilepsy allows social care providers and policy makers to better support the caregivers in the community.

Acknowledgement

I wish to thank the following persons for their contributions to this project. I would like to thank Mr. Raymond Yeung for his valuable technical support in collecting the data about the measuring instrument; Ms. Ki, former staff of Enlighten-Action for Epilepsy; and Adam and Betty for their courage and willingness to share their life stories and those of their beloved children.

Special thanks should be given to the Head in School of Social Work, Dr. LI Kin-yin, research project supervisor Dr. WONG Kam-chung, senior lecturer Mr. LEUNG Yiu-por, and Ms. Eliza LAU, Lecturer of Department of English. I have significantly benefited from their professional guidance, valuable and constructive recommendations on this project.

With deep sense of gratitude, the Honours Project would not have been possible without the love, support, and encouragement from my mother, and passed away father, throughout my study. I wish to dedicate this project to my heavenly father, mother, and my epileptic friends.

List of Abbreviations

Abbreviations	Full form
CB	Caregiver Burden
CG	Care Giver
CS	Caregiving Stress
CSSA	Comprehensive Social Security Assistance
CR	Care Receiver
FCG	Familial Care Giver
NGO	Non-governmental Organisation
PwE	Person with Epilepsy
SSA	Social Security Allowance Scheme
QoL	Quality of Life
ZCBI	Zarit Caregiver Burden Inventory

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Introduction

The researcher spent five months working as a student social worker in a bilingual and non-medical non-government organization called Enlighten-Action for Epilepsy (<http://www.enlightenhk.org/>), which expresses concern and advocates the rights of persons with epilepsy (PwEs) in Hong Kong. The work with caregivers (CGs) could be emotional laden, and they are isolated from the community with insufficient resources. CGs and social workers, as an alliance, carry numerous responsibilities that are leading to stress and exhaustion eventually.

Research and studies on stress of caregivers of PwE and support services in Hong Kong have not sufficiently investigated the epidemiology of epilepsy, even though epilepsy is demonstrated as the most common chronic and severe neurological condition covering 94% of the world population (World Health Organization & World Federation of Neurology, 2017). The latest research on the psychosocial well-being of CGs of PwE in Hong Kong was done in 2002 (Lee et al., 2002). Now, over 17 years later, the stresses of CGs of PwE may have loaded significantly due to social change. The research gap constitutes an essential yet hugely unstudied area and tremendous uncertainty that have not yet been resolved, which is often neglected by the public. Up-to-date research is needed.

Since there are no official community support services provided mainly for the above-mentioned group, the researcher believes that the social care support service of this vulnerable group in Hong Kong should be improved, and they need to be supported by the general public - especially for those with a lack of self-advocacy skills and having complex support and health needs. Social workers and other professionals should start to change the service delivery model in the current social welfare system to pay more attention to the needs of PwEs and their familial carers, and adequately support the targeted clients not just in formal welfare aspect, but also make references from some other countries, which could then positively influence the quality of support as well.

This study will investigate the stressors that the informal familial CGs often encounter, what experiences they have and how such stressors and experiences affect their quality of life (QoL) and their coping strategies as individuals on all aspects, including physical, psychological and social ones. As such, it helps to understand their needs, and propose on how to sustainably and efficiently strengthen the social care and health care of PwEs and their CGs. The general aim of the present study is to inform the authority the problems faced by PwEs and CGs, enhancing their QoL by suggesting social support services options in Hong Kong.

Conceptual Framework

Ecological systems theory is adopted as a lens, guiding the interpretation of collected data and evaluation of the study. The model is divided into four levels; they are microsystem, mesosystem, exosystem and macrosystem. The mesosystem refers to “the interrelations among two or more settings in which the person actively participates among family, work and social life” (Frels & Onwuegbuzie, 2013, p.4). This study using both quantitative and qualitative methods investigates all the levels of microsystem, mesosystem, and macrosystem, particularly focusing on the mesosystem.

By applying the conceptual framework of ecological systems, specifically the mesosystem, this study seeks to identify the stressors that affect the QoL of CGs of PwEs in Hong Kong. It is crucial for social workers, policy makers, and other professionals to understand their roles in providing support to familial CGs, and to establish the cornerstone of networking by suggesting appropriate support services for this group of people in Hong Kong.

Literature Review

A literature review will be performed below, discussing the concepts of epilepsy, familial CG, QoL, caregiving burden (CB), and CG coping, as well as stigmatisation with theoretical framework applied and methodologies of previous studies mentioned. The limitations of the previous studies and existing research gap will also be addressed.

Epilepsy

Epilepsy is identified as the condition with neuronal excitability, characterised preponderantly by unpredictable and recurrent seizures in cerebral origin due to disturbances in its electrical functions (Fisher et al., 2005; World Health Organization & World Federation of Neurology, 2017). It leads to an unprovoked “involuntary change in body movement, sensation, awareness, or behaviour” (Hodge et al., 2017). The latest prevalence rate for epilepsy in Hong Kong was reported in Hui’s study (2004). They estimated that approximately 4.5/1 000 individuals have active epilepsy. The scientific epidemiological studies on epilepsy in Hong Kong is exceptionally outdated.

Familial Caregiver

Kim et al. (2011) defined CGs as “persons who assist individual with at least one activity of daily living”, assisting in financial management, household, daily living and/or medical tasks. Providing care for family members dates to the earliest years of humanity (Link, 2015). Familial CGs are informal carers. They can be a spouse, adult child, in-law or close relative (Noelker & Browdie, 2012).

Quality of Life

QoL refers to the subjective well-being of individuals which is

constructed by societies, and they emotionally and cognitively evaluate their lives (Diener, 1984). The significance of observing life satisfaction was emphasised by Barcaccia (2013), concerning physical health, family, financial status, environment, etc. Karakis et al. (2014) adopted the instruments of QOLIE-31 and Zarit Caregiver Burden Inventory (ZCBI), evaluating how epilepsy influenced CG's QoL in their cross-sectional study. Collected data reflected that QoL scores of CGs of PwE had an average of 54, which was associated with worse physical health, lower social functioning level, higher depression scores, etc. Situations like PwE's unemployment, longer duration of disease, and shorter periods of seizure freedom would be the stressors that contribute to caregiving burden (CB). Karakis et al. (2014) also found CB has a negative impact on CG's health-related QoL, which ultimately brings negative impact on the PwE's QoL.

Caregiving Burden

Collins et al. (1994) defined CB as the negative objective and subjective outcomes such as “experiencing psychological distress, physical health problems, economic and social problems, breakdown of family relationships and feeling of despair which are brought about by the caregiving burden undertaken by the caregiver”. In Zarit et al. (1980)'s study, ZCBI was the instrument evaluating the CGs' CB. The 22-item self-administered scale comprises 5 domains: 1) sacrifice and strain (8 items), 2) inadequacy (2 items), 3) embarrassment/anger (3 items), 4) dependency (3 items), and 5) loss of control (4 items). It would also be adopted as the instrument in this study.

Attachment

CB implies the concept of “attachment” as suggested in the attachment theory (Bowlby, 1969). From the interactions between primary CGs and PwEs in the early stage of life, individuals would develop mutual, continuing cognitive schemas (attachment orientations) that sustain into adulthood and guide day-to-day behaviours and expectations in relationships. The sense of connecting with another person is related to the concept of dependency (Sigelman & Rider, 2014).

Stress Level

Yigitalp et al. (2017) suggested stress level is a significant predictor for CB. The study proved a significant positive correlation between CB and stress level of CGs, implying high-level stress would have an increase in CB at the same time.

Psychological Health Effect

According to diathesis-stress model, it identifies that “stress may activate a diathesis or vulnerability, transforming the potential of predisposition into the actuality of psychopathology” (Monroe & Simons, 1991). As mentioned in Bevans and Sternberg (2012)’s study, it is common that caregiving stress (CS) causes psychological problems. Signs and symptoms of CS, such as anxiety, depression, worry, and loneliness, are deleterious to one’s health. Similar to the above findings, CGs had lower levels of self-care and deterioration of family relations because of their caring responsibilities (Özyeşil et al., 2014). Nevertheless, the physical effect on health is not mentioned in the literature.

Financial Pressures

As demonstrated in Allers et al. (2015)’s cross-sectional study, epilepsy added a substantial economic burden for the whole health system, PwEs and their families. This could be related to the financial costs incurred in the daily medical care, the impact of the disease on the employment status of CGs due to difficulties in finding and maintaining jobs that could accommodate their caring needs.

Stigmatization

In Karakis et al. (2014) ’s study, a positive correlation between unpredictability and high level of stigmatisation was proved. It was associated with the descriptions of seizure symptoms of epilepsy. In China, these descriptions are often influenced by the traditional and pejorative beliefs about epilepsy that still widely exist. Guo et al. (2012) suggested the stigma of PwEs is demonstrated at the individual, interpersonal

and institutional level in the Chinese socio-cultural context. Another finding was that the negative self-evaluation of PwEs and their CGs was “accompanied by a negative emotional experience stimulated by the responses of others”.

Caregiver Coping

CGs of PwE have their unique ways of coping with challenges of caring for PwE. Coping may be defined as a “process of adaptation to stressful situations”, which includes the “allocation of cognitive and behavioural resources in response to specific internal and/or external demands that are deemed to exceed the subject’s normal requests” (Folkman & Lazarus, 1980). The first type of coping is task-focused method. People with this coping method seek to actively work on a task that will solve the problem or make it less problematic, such as having a sense of control over the challenges by organising, searching information and planning. Higgins and Endler (1995) noted that if the frequency of task-focused coping method increases, the distress would be decreased.

CGs would also use the second type of coping, emotion-focused coping method, to regulate distressing emotions. Many of them would have emotional expressions, fantasies, and keep reflecting on either positive or negative thoughts (Bauman et al., 2008).

Higgins and Endler (1995) pointed out the third type of coping, avoidance-focused coping method, which includes escaping from adverse situation and social diversion. Williams et al. (2014) added on that feelings of helplessness were also presented as avoidant coping behaviours, particularly when CGs were feeling a poor QoL of themselves or of their care receiver (CR) and loss of control. An example of avoidance-focused coping behaviour is stop bringing CR to social events or public areas so as to maintain CR’s dignity, protecting both CG and CR from “humiliation” or “embarrassment” (Williams et al, 2014).

Several studies (Higgins & Endler, 1995; Bauman et al., 2008; Thompson, 2009) have suggested that emotion-focused and avoidance-focused coping strategies may be dysfunctional, as people with these coping strategies are distracted from understanding or dealing with daily tasks

and responsibilities from their roles, leading to increased physiological and psychological distress.

Considering what the literature says about CB, it is worth to have a further study to identify other stressors, discover the power of its effects, and also how CGs and the former staff of Enlighten view their situations in order to let relevant professionals provide additional resources and social support to them.

Research Questions

Based on the above literature review, the researcher developed the following research questions of the present study:

1. What are the stressors of CGs of PwE?
2. How these stressors affect the QoL of CGs of PwE?
3. What and how are the coping strategies beneficial to CGs of PwE?

Methodology

Study Design

A mixed method research design was employed to generate a broader variety of data. A quantitative questionnaire with standardised measure was followed up by qualitative interviews comprising two individuals who had participated in the survey through snowball sampling. Semi-structured interview technique was employed with open-ended questions in assessing different aspects of CB. Besides interviewing two CGs, an interview with a former staff who worked at Enlighten-Action for Epilepsy, serving the PwE and their CGs, was conducted. The staff interpreted the current situation, identified service gap and made some suggestions.

Sampling Method

After the pilot test, questionnaire and interview guides were prepared. Snowball, a non-probability sampling method, was adopted to reach the target group for the quantitative study. The researcher used personal contacts and invited former staffs of Enlighten-Action for Epilepsy for referral. CGs of PwE were invited to fill the questionnaire. For the qualitative part, two CGs who had participated in the quantitative study and a former staff from the referral agency were invited to participate in the interviews.

Inclusion and Exclusion Criteria

CG informants were recruited in Hong Kong. The inclusion criteria for CGs of PwE were as follows: (a) age ≥ 18 years; (b) ability to communicate in Chinese; and (c) providing written consent. Exclusion criteria were (a) diagnosis of seizure rather than epilepsy; (b) self-care PwE. All informants were informed about the aims of the study and gave their

consent before participating in the quantitative study or in-depth interview.

Recruitment

At the beginning, the researcher tried to invite potential informants from Enlighten-Actions for Epilepsy through e-mail and phone calls, but there was no reply. Informants were therefore recruited to this study through referrals by former staff and personal contact, and then the researcher adopted a snowball sampling to potential respondents and sought their consent to participate in the study. The questionnaire (Appendix A) or semi-structured interview guide (Appendix B for CGs or Appendix C for staff) was attached to the invitation letter, while the researcher would ensure the confidentiality and the freedom of right of withdrawal at any data collection stage.

Data Collection

Both the questionnaire and semi-structured interview guides were used as a method for data collection. Quantitative data were collected on a range of demographic and socio-economic variables. CB was measured by completing the standardized instrument, ZCBI. Each question is scored on a 5-point Likert scale ranging from – “never, 0” to “always present, 4”.

The in-depth interviews were conducted by the researcher and lasted about forty-five minutes to ninety minutes in Cantonese. All interviews were conducted in private meeting areas according to the participant’s preference. In the in-depth interviews, three introductory questions were included, followed by fourteen questions for CG and eight questions for staff. The researcher tape-recorded the interviews and transcribed them together with observations of non-verbal behaviors.

Analysis

Data collected are used for analysis which creates categories from the data and then finding relationships between categories while attending to how the “lived experience” of research informants can be understood (Charmaz, 1990, p.1162). A mixed methods analysis was undertaken to

provide a more comprehensive coverage. In this study, data from 38 CGs with 43 CRs were collected from the questionnaire. One male and one female from the quantitative study, and a former staff from the agency participated in the in-depth interview.

For the quantitative study, descriptive statistical analyses were performed using SPSS v23 to describe the characteristics of the CGs and CRs, and inferential statistical analyses were used to find out relationship between different variables such as measures of CB and time spent. For the qualitative study, the researcher used thematic analysis, and coded each answer or phrase to discover themes, sub-themes and categories.

In this study, the results are presented separately, with integrated interpretation in the narrative discussion.

Ethical Issue and Confidentiality

The researcher was responsible for the content and writing of the report. She ensured the confidentiality and privacy. Written informed consent was obtained from the informants and interviews were conducted in private places. Informants had the right to withdraw at any time during the data collection process. Ethics approval was sought from Gratia Christian College.

Research Outcome

Stressors, their effect and coping strategies of CGs were analysed, whilst implications of CG support service would also be discussed basing on the findings and analysis from the data collected in this study.

Results

Statistical Analysis

A total of 60 questionnaires were distributed, and 38 questionnaires were collected with a response rate of 63%.

Background Information of Familial Caregivers. This information was self-reported. The ages of familial caregivers (FCGs) ranged from 30 to 69 years old, with a mean age of 52 (SD=9.88). The informants included 13 men (34%) and 25 women (66%). The relationships of FCGs with the CR were: 17 daughters (39.5%), 16 sons (37.2%), 1 husband (2.3%), and the rest missing. The mean length of being a FCG was 15 years (M=14.18; SD=9.98). Among the 38 informants, 9 of them had been a FCG for less than 5 years (23.7%), 13 of them had 5 to 15 years (34.2%) and 16 of them had more than 15 years (42.1%). Related to hours spent in caring: 16 of them spent 1-50 hours per week (42.1%); 8 of them spent 51-100 hours per week (21.0%); 4 of them spent 101-150 hours per week (10.5%); and 10 of them spent 151 hours or over per week (26.3%); and the mean caregiving time was 86.2 hours (SD = 60.19). 32 FCGs (84.2%) were the only-caregivers, while only 6 (15.8%) of them were not. The FCGs sampled also reported multiple chronic illnesses they had (e.g., diabetes, high blood pressure, stroke sequelae, depression, Alzheimer's disease, and cancer). In response to question of perceived health condition from "never" (1) to "always" (5), 3 respondents (7.9%) reported "always", 6 (15.8%) reported "quite frequently", 9 (23.7%) reported "sometimes", 17 (44.7%) reported "rarely", and 3 (7.9%) reported "never" (M=2.71; SD=1.09).

Background Information of Care Receivers. The gender of CRs broke down to 26 men (59.3%) and 17 women (44.7%). The age of CRs ranged from 6 to 71 years, with a mean age of 21.63 (SD=10.98). 18 CRs received care from their FCGs since they were born, while other cases occurred with unknown reason or by accident after birth.

Descriptions of ZCBI. The ZCBI is a scale with 5 sub-scales with a total of 22 items, measuring CB by means of a five-point scale, from never (0), rarely (1), sometimes (2), quite frequently (3) to always (4). Higher scores indicate a higher family CB.

The ‘Sacrifice and Strain’ subscale contains eight items: # 2, 3, 7, 10, 11, 12, 13 and 15. The total scores of this subscale ranged from 16 to 32. FCGs felt that they experienced a high level of sacrifice and strain (M=25.97; SD=5.94). The total scores of ‘Inadequacy’ subscale (# 20 and 21) from respondents ranged from 4 to 8. FCGs felt that they had a significantly high level of inadequacy (M=6.50; SD=.952). Regarding the ‘Embarrassment/Anger’ subscale, it has three items (# 4, 5 and 6). The total scores of this subscale ranged from 2 to 9. FCGs perceived a medium level of embarrassment or anger (M=6.32; SD=1.71). For the ‘Dependency’ subscale, it includes three items (# 1, 8 and 14). The total scores of this subscale ranged from 3 to 11. FCGs felt that CRs had a moderate level of dependency (M=7.58; SD=2.30). For the ‘Loss of Control’ subscale, it includes four questions (# 16, 17, 18 and 19). The total scores of this subscale ranged from 6 to 14. FCGs felt a moderate level of loss of control (M=8.92; SD=1.79) (Table 1).

Table 1 Results of Care Giving Burden

	N	Minimum	Maximum	Mean	Std. Deviation
Sacrifice and strain (ZCBI-1)	38	16	32	25.97	5.943
Inadequacy (ZCBI-2)	38	4	8	6.50	.952
Embarrassment/Anger (ZCBI-3)	38	2	9	6.32	1.710
Dependency (ZCBI-4)	38	3	11	7.58	2.309
Loss of Control (ZCBI-5)	38	6	14	8.92	1.792
Valid N (listwise)	38				

Overall, the total scores of the ZCBI ranged from 31 to 74. Most FCGs felt a moderate to severe level of CB (N=38; M=58.37; SD= 11.01) (Table 2).

Table 2 Description of Total ZCBI Scores of FCGs

	N	Minimum	Maximum	Mean	Std. Deviation
Total ZBI Scores	38	31.0	74.0	58.368	11.0145
Valid N (listwise)	38				

Correlations between ZCBI and Caregiving Time Spent. Results of the Pearson correlation indicated that there was a significant positive association between **time spent on caregiving** and the ZCBI total scores of respondents ($r = .912$, $p < .001$) (Table 3). FCGs with more caregiving time spent per week had a higher total score of ZBI, implying the more time they spent on caring, the more they experienced a greater CB. FCGs who spent lesser caregiving time experienced a lower CB (Table 3).

Table 3 Correlation between Caregiving Time Spent Per Week and Total ZCBI Scores

		Caregiving Time Spent Per Week (Hours)	Total ZCBI Scores
Caregiving Time Spent Per Week (Hours)	Pearson Correlation	1	.912**
	Sig. (2-tailed)		.000
	N	38	38
Total ZCBI Scores	Pearson Correlation	.912**	1
	Sig. (2-tailed)	.000	
	N	38	38

Thematic Analysis

The following themes were identified from the interviews with a father and a mother as carer.

Physical Demand

The declining situation of the PwEs brought heavy burden to the CGs, as extra caregiving tasks were required.

Heavy caregiving duties led to exhaustion

Declining physical function, increasing seizure frequency, impaired cognition, and behaviour problems of PwEs, together with difficulties in communication contributed to difficult experiences for the FCGs. The caregiving tasks included assistance with activities of daily living, washing, medical check-ups, personal care, handling the tantrum of the PwEs, and the rest as illustrated by the following quote:

“My daughter had serious constipation. Then her medicine was changed. During this transition period, she had difficulties in alertness and concentration. I had to protect her safety..... My daughter has emotional and behaviour problems. She has self-harm inclination.” - Mother

The demands on the FCGs were great and heavy. As Mother, she not only had to take care of her daughter’s daily living routine and medical need, but also had to attend to her emotional, behavioural and safety issues.

Heavy caregiving duties led to poor health condition

Both respondent Father and respondent Mother reported worse physical health, pain and poor sleeping quality. Father addressed, “Now thinking back, I lacked enough sleep. My body muscles are so painful for no reason; I also have joint strain”.

Psychosocial and Emotional Wellbeing

Caregiving influences various aspects of the psychosocial and emotional well-being of the CGs. Both the Father and Mother indicated anger, fear, worry, hopelessness, helplessness, stress, frustration, and uncertainty as being a FCG. The researcher observed during the interviews that the informants had frustration at their inability and inadequacy in

restoring the QoL of the PwE or comprehending the child's condition, for example, when their child's physical and cognitive levels were declining, or having only one-way communication with the PwE, as illustrated by the following quote: ...

"Sometimes my daughter ignores me. I don't know whether she is having absence or not (a kind of seizure that PwE would temporarily lose consciousness)." - Mother

Caregivers were always flooded with negative emotions during their caregiving

The emotional aspects of providing care were experienced as sometimes more difficult than the physical ones.

"I saw her struggling with handwriting. I thought she was lazy, so I was mad at her." -Mother

Mother added on saying that she felt impatient with the emotional expression of her daughter as she *"pulls off her hair to express her hunger, has a bad temper when she does not want to eat vegetables and so on."*

Feeling of uncertainty and fear about the future

"It's like endless...but I am growing old." - Father

They did not know what would happen or how to deal with the future:

"I always cry for my inability to take care of my daughter, feel worried...everything is out of my control..... I am afraid what she will become without me." - Mother

For some people, there would be uncertainties about their capability as a FCG, no matter it was in the past, present or future. They were not certain if their care provided was adequate and sufficient or not.

Secondary trauma

FCGs were under psychological and emotional stress when they were performing the caregiving role. At the same time, they were also under stress when they saw the suffering and gradual deterioration of the PwE. This further made them emotionally out of control.

“She was distressed due to my anger, then, how can I beat her further?” - Mother

“I can only comfort myself but do nothing.” - Mother

Ambivalence towards seeking help

Overloaded role was a reason leading to lack of freedom. FCGs wanted to bear all the responsibilities, preparing and finishing all the tasks the PwE had to complete. Seeking for help and learning to accept help offered by others would minimise the situation of overload. Like Mother said that she would ask her neighbour to take care of her daughter for an hour or two when needed.

However, sometimes they regretted for seeking help as both interviewees described themselves as “trapped” in their caregiving role. For example, when Mother was sick and had to go to the hospital, as she said, *“I felt helpless. I had no choice. When I also had emotions, I took her to respite care, even though I really regretted after that.”* She also felt that the emotions were insurmountable. FCGs might experience depression and have suicidal thoughts.

Familial-relationship and Interpersonal Relationship. Lacking support, the role of FCG had negative impacts on family relationships and dynamics, and even marriage, and on FCGs’ relationship with other people.

Lack of support from original family leading to divorce

“The reason for divorce with my ex-wife is due to my two sons. Even my family members said they do not mind visiting me, we seldom contact each other, as I am not outstanding enough to give birth to sons who would make them feel pound of.” - Father

Father could not get any support from his original family members, as they were not proud of his sons. Also due to this reason, his wife left him.

Lack of support leading to taking new roles

Caregiving changed existing relationships and presented new expectations and roles.

“I become the private tutor of my sons.” - Father

Lack of support leading to suicidal thought

“My husband passed away. I started thinking another way and wanted to die so much. I was not supported. I did not know any place, or anyone who can offer help.” - Mother

Social stigma leading to social isolation

People often consider epilepsy to be a form of insanity. Some would suggest social avoidance and exclusion.

“My daughter would scream and hit people. Some people will say to me - what’s wrong with you? Why you bring her [my daughter] out?” - Mother

Lack of social support leading to becoming the only-caregiver taking multi-roles

Identity is related to the responsibility of oneself. Only-caregiver sometimes can be accompanied by a change in how the CG sees him/herself. Without any social support, the only-caregiver perceived himself to be multi-functional and have multi-roles.

“I am their father, yet I am now becoming their caregiver, tutor, breakfast maker, etc.” - Father

Limitation and Constraint as a Result of Caregiving

The relentless and usually unlimited-time duties in taking care of PwE leads to the following constraints.

Lack of freedom

Lack of freedom means lacking time and opportunities for other engagement, such as employment, social activities and leisure.

“If I don’t need to take care of my sons, I would be able to work, and have more chances to have social gathering with friends.” - Father

Life have changed

The relentless aspect of the caregiving role can be summarised as:

“I am the only-caregiver; the work just never stops.” - Father

As a result, life has changed.

“I haven’t gone out with my friends and family for a long time. Even when I want to relax, I will find an excuse to reject my friends’ invitation, except those who don’t mind I bring my sons with me” - Father

Limited me time

Being a CG can often be restrictive in their time and place due to the demanding caretaking duties. As a result, private time is scarce.

“After my sons have gone to the special school, the breakfast time is the freest time of the whole day for me”. - Father

Limited personal space leading to poor health

Caregiving responsibilities often competed with other family commitments or personal issues. All efforts were focused on the CR to the extreme situation of neglecting one’s own health.

“Doing everything, making sure she is okay...” - Mother

“Once I had a minor stroke, I didn’t want to stay in the hospital, since my daughter was scared and nobody could take care of her.” - Mother

Discussion

In this study, CB includes physical, psychological, emotional, social and practical challenges which will be faced when providing care for PwE. CGs provide a considerable amount of care for PwE, sacrifice themselves, resulting in strain and feeling of inadequacy, which are profoundly influencing CGs' CB. Such results are consistent with findings already reported in the literature (Collins et al., 1994).

Caring for PwE generates a number of issues, especially when the PwE has chronic disabled conditions. CGs encounter both common and unique challenges and have different caregiving experiences that influence their ability and sense of competence to provide care to PwE. Many factors render the multidimensional challenges, making CB more unique and complex. Epilepsy is characterised by sudden onset and accident, predicted but inevitable physical decline, potential cognitive impairment, and sudden death. It is a relentlessly progressive condition with no cure, and currently, no treatment is known as the best since each case is unique. Nevertheless, most of the PwEs can only rely on medicine to control the frequency of seizure.

The CGs in this study were predominantly parents of the PwE. In the questionnaire, some indicated that they found not too many difficulties about caregiving, but when they answered the question of "overall, how burdened you feel...?" (Z22), a majority indicated "always" or "quite frequently" burdened. Besides, the mean of ZCBI burden score (58.37) demonstrated CG's burden was moderately high, which needed further assessment and intervention. The scores distribution of ZCBI-22 items and its mean item scores presented CGs' fear of the uncertainty of future, not having enough money, dependency of CR, competing responsibilities and time restriction as major contributors to CB. The analysis of qualitative data in this study offered a more comprehensive perspective and deepened our understanding about the identified contributors of CB from the quantitative data and revealed other new aspects.

During the interviews, the difficulties disclosed by CGs could be categorised into four main themes with several sub-themes. The caregiving role and daily tasks were related to management of the health and living condition; impact on psychosocial and emotional wellbeing such as depression and anxiety were manifested in worry, shame, fear and frustration, helplessness, and hopelessness. Also, the emotional impact of witnessing PwE's suffering was accompanied by anticipatory worry about present and future losses. Limited time, lack of family support and social life and increasing responsibilities were viewed as anticipated difficulties associated with providing care. The caregiving role was dominating among all other roles, giving a powerful impact on inter-personal relationship, personal role and identity. CGs of PwE are providing care to their loved one while at the same time experiencing PwE's illness; they are vulnerably exposed to their loved one's suffering and their own distress as a result of the CB which is uncontrollable and inevitable.

This study yields a worth noting finding, as the bivariate analysis revealed a significant positive correlation between the caregiving time spent and ZCBI score ($r(37) = .91, p < .001$), implying that the more time spent on care giving, the higher the feeling of burden resulting from 'sacrifice and strain', 'inadequacy', 'embarrassment/anger', 'dependency', and 'loss of control'. Time is an essential component for caregiving and dealing with difficulties. As time was given to taking care of their family member with epilepsy, eventually, self-care time was limited as shown in the qualitative study.

These findings are consistent with previous research on CB in epilepsy (Nuhu et al., 2010; Karakis et al., 2014) in terms of lessened QoL for CGs, intensified psychological distress, fear of unknown future, feelings of PwE's endless dependence on the CGs, taking most of the responsibility of caring, time demands and restriction on the social life of the CGs. Monin and Schulz (2009) mentioned that exposing to the suffering of a loved one and competing demand of different roles could directly affect familial CGs' emotional experiences, subsequently affecting their psychological and physical health.

Caregiving research has been focused on the role of coping in the adaptation to caregiving (Pakenham et al., 2007). Coping varies in different

persons. It is an individual response to stress as a whole and will, therefore, influence mental health during adverse life events. Task-focussed coping is one of the methods. People using task-focused coping methods would adjust to the caregiving role and responsibilities and were associated with more positive adjustment and outcomes. Emotion-focussed coping was found in associating negatively with the CG adjustment and linked to increased psychological and emotional distress, especially when CGs felt that these caring tasks were their personal responsibility and no one else could do it. Traditional Chinese culture may impact on CG experiences in several domains, including coping style and utilization of support services. They merely take a passive role in seeking help and are avoidant. Some may tend to normalise the struggles of caregiving with other CGs as a way for them to feel less isolated and that the challenges are more universal, making them feel less lonely (Williams et al., 2014).

Implication to Policy, Practice, and Research

The findings of this study have numerous implications for policy makers and practitioners who are engaging directly and/or indirectly with CGs of PwE. The findings of this study provided strong support to current literature in regard to CGs of PwE, proving CGs need both informal and formal supports. In light of such findings, several implications of policy, practice, and research which are potentially practical will be addressed below.

Implication to Policy

In Hong Kong, since there is insufficient formal support service and the current policy frameworks are not adapted to meet the needs of a growing number of FCGs, the access to financial support, flexible employment and social supports facilitating and enhancing the care of the familial CSs are immensely limited. Several of the Hong Kong social welfare policies the author identified—exceptionally comprehensive CG tax benefits or social security benefits including Comprehensive Social Security Assistance (CSSA) Scheme and Social Security Allowance (SSA) Scheme offered by the Social Welfare Department (https://www.swd.gov.hk/en/index/site_pubsvc/page_socsecu/), do not exist in any comprehensive sense.

Therefore, the author suggests the existing policies could serve as a scaffolding for a more comprehensive program to respond to CG needs with reference to the New Policy Strategy from the United States proposed by James et al. (2016). Aiming to relieve the stress of the carers and improve the QoL of patients with chronic diseases, it could include some combination of the followings in the current Hong Kong situation:

Tax Credits. Increase the amount of Disabled Dependant Tax Allowance.

Social Security. Expansion of Higher Disability Allowance (HDA) by relaxing the eligibility criteria. For example, allow PwE receiving HDA and receiving care in residential institutions subsidised by the government (including subsidised places in subvented/contract homes and residential care homes under various bought place schemes) or all public hospitals and institutions under the Hospital Authority, or boarding in special schools under the Education Bureau simultaneously; inclusion of “Caregiving Allowance” into the category of SSA Scheme when the eligibility criteria are fulfilled.

Family and Medical Leave. Paid family and medical leave should be provided since CGs may require more time off from work, as PwEs require more medium-term care from the CGs.

Employment Opportunity and Caregiving Training. Expansion of “Training and Employment Programs”, providing initial and ongoing training opportunities during employment.

CGs are also assets of our society. Some CGs may be forced to take care of the PwE at home. It may directly affect the income of the family. If additional hybrid caregiving and employment training/opportunities are offered, they may be able to provide the PwE with higher quality care. Besides, the “work-from-home” policy may result in higher job satisfaction of the CGs. Such training, development, and employment opportunities would be attractive to CGs in working ages when considering employment options.

Community-Based Care Services. Increased and improved appropriations to support the home accommodation, day training services and respite care for the PwEs.

Implication to Practice

Professionals and service workers should prepare familial CGs for their care giving role, and to consider them as members of the health-care workforce by relieving their care giving stress and improving their protective factors.

Self-help and Mutual-help Groups as Caregiver Support Services.

Enhancing protective factors have many ways; it could be a supportive peer network and individual social and emotional competence. Self-help and mutual-aid groups are the informal platform for CGs of PwE to enhance the above protective factors. Its establishment would promote the sense of mutual support and instil hope among PwEs and their family members by ventilating their feelings and thoughts, enhancing the understanding and reducing the stigmatisation of the public about epilepsy, or even advocacy for the welfare and rights of PwEs and their family members. According to systems theory (Hanson, 1995), establishing mutual/self-help groups would help to build the cornerstones of networking in which strengthening a part of the system would improve the whole. During the process of identifying and resolving problems, it is facilitating the coping networks which consists of a set of relationships among people with a common aim. Social workers and professionals are the stimuli that facilitate change. Change emerges from the mutual aid system, including people in similar circumstances and their family members, friends and neighbours. Through transforming a positive parent-child relationship, coping strategies and sense of competence, it would facilitate not just personal growth, but also community development. Social worker's role is to help the networks to develop reflexivity and improve its ability to enhance wellness. Meanwhile, the networks enable social workers to understand better how they can support it (Folgheraiter & Raineri, 2012). Help is constructed through the interaction between practitioners and coping networks, and that the contribution of those directly concerned is essential to establish the cornerstones of the networking.

Volunteering Program. When caregivers are overcoming feelings of hopelessness, they may become agents of change and spread the hope to others. Through experience sharing, they change their role from "helpee" to helper, facilitating the benefits experienced by persons engaged in a helping role as proposed by Riessman (1965). He also suggested that the helpers could improve their self-image after going through significant development of abilities, after having been given guidance in a system and learning through teaching others when mobilising different systems. Besides, as they gain access to a socially-valued role as volunteers, with the resultant sense of social status and importance, they have the opportunities to affirm one's wellness, as well as shifting one's focus from self-concern and

problems to assisting others. After having the chance of role differentiation and distracting oneself from ongoing difficulties, such helping is a way of altruism, empowering CGs and their families to take more initiative in social participation.

Implication to Research

Future research should pay more attention to the following points:

Sample Size. The sample size of this study was relatively small; therefore, more samples of CGs of PwE should be recruited in future research.

Directions. There was only one informant who discussed the accommodation of PwE and the services provided by the NGOs. Future research could also focus on the role social workers play in assisting CGs to have a higher level of social participation and release their CB.

Limitations

The present study bears two limitations which need to be considered for future research.

First, self-reporting study bears a risk of inherent bias and social desirability bias; some answers might be exaggerated or too embarrassed to reveal in details.

Second, although the author attempted to enlarge the sample size, accessibility was an encountered difficulty. Informants were recruited by referrals and relied on voluntary participation, so the study results can be applied to CGs who are willing to share their experiences. The modest sample size of CG informants may have undermined the significance of this study, resulting in the limitation of generalizability.

Conclusion

Professionals including social workers and policymakers should play a significant role in strengthening the financial and social support systems, recognising CB, engaging families, and opening lines of communication. Providing a strong and balanced support system for CGs and families who strive to take care of their family member with epilepsy at home should be an important goal.

To conclude, findings from the present study show that there is high CB of familial CGs, and it profoundly affects their QoL. The results also provide insights on the importance of comprehensive assessment of stressors. It shows that CB is high when there are too much sacrifice and strain, feeling of inadequacy of caregivers, the dependency of PwE, and loss of control on one's life. Support, including both formal and informal support, play a vital part in assisting in stress and burden reduction. Further research is needed in acknowledging their needs and supporting this vulnerable group of people. The research purpose was to reflect that social workers, policymakers and other professionals should identify caregiving stress and provide resource and access to support systems to CGs of PwE and PwEs as well. The research on epileptic CB needs to be continued to explore more what social workers should and would play within the current social service provisions and social welfare policy.

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Appendix A

宏恩基督教學院 腦癇症照顧者生活素質研究 問卷調查

本研究由宏恩基督教學院進行，旨在了解本地腦癇症照顧者的壓力與生活素質，以及探討發展相關支援服務的可行性。

此問卷只限本學系研究人員作統計分析之用，所有資料將以匿名形式保存和堅守保密原則。所進行的研究對訪談者不會有任何負面的影響，受訪者亦有拒絕填寫問卷的權利。如有任何疑問，請聯絡協助本研究的機構同工（如職員）宏恩基督教學院社會工作學系同學 XXX 小姐（電話：XXXXXXXX，電郵：sXXXXXXXX@gratia.edu.hk）或督導老師 XXXX（電話：XXXXXXXX，電郵：sXXXXXXXX@gratia.edu.hk）聯絡。

一) 研究目的：

本問卷目的是收集腦癇症病人照顧者的狀況，進行統計分析，盼藉以改善照顧者服務，令腦癇症患者、照顧者和家人有所得益。本同意書包括以下內容：

二) 填答問卷程序：

你將會填寫一份有關你照顧腦癇症患和日常生活情況的問卷，需時組 15 分鐘。請留意你所填寫的答案並沒有對錯之分，故請以你的真實經驗填寫，無須與別人討論問卷問題。以你在填寫期間對問卷有任何不清楚的地方，可隨時向訪問員澄清。

三) 參與風險：

參與這項研究是沒有已知的風險。

四) 保密範圍：

此問卷只限本研究人員作統計分析之用，所有資料絕對保密，並於研究完成後三個月內銷毀。

五) 退出自由：

參與是次研究純屬自願性質。當中如有問題令你覺得回應會感到不安，你有權拒絕回答該問題和在任何時候退出研究。

由於參與研究屬自願性質，如閣下願意參與，懇請簽署以下同意書。

本人_____已閱讀和清楚了解明白同意書內容，並同意參與問卷調查。

參加者簽署：_____ 日期：2019年__月__日

基本資料

1.	照顧者年齡：	
2.	照顧者性別：	<input type="checkbox"/> 男 <input type="checkbox"/> 女
3.	被照顧者年齡：	
4.	被照顧者性別：	<input type="checkbox"/> 男 <input type="checkbox"/> 女
5.	居住地區：	<input type="checkbox"/> 深水埗 <input type="checkbox"/> 長沙灣 <input type="checkbox"/> 大角咀 <input type="checkbox"/> 黃大仙 <input type="checkbox"/> 觀塘 <input type="checkbox"/> 其他：_____
6.	你是被照顧者的：	<input type="checkbox"/> 配偶 <input type="checkbox"/> 子女 <input type="checkbox"/> 媳/婿 <input type="checkbox"/> 兄弟/姊妹 <input type="checkbox"/> 親屬 <input type="checkbox"/> 其他：_____
7.	照顧年期：	_____年至今 / _____至_____期間
8.	平均每星期的照顧時間：	_____小時
9.	你是否家中唯一照顧者？	<input type="checkbox"/> 是 <input type="checkbox"/> 否

10.	<p>照顧者健康狀況 (可選多項)：</p> <p>i) 照顧者有沒有慢性病？</p> <p><input type="checkbox"/> 沒有 <input type="checkbox"/> 高血壓 <input type="checkbox"/> 高膽固醇 <input type="checkbox"/> 糖尿病 <input type="checkbox"/> 白內障 <input type="checkbox"/> 青光眼 <input type="checkbox"/> 關節炎 <input type="checkbox"/> 骨質疏鬆 <input type="checkbox"/> 心臟病 <input type="checkbox"/> 氣喘 <input type="checkbox"/> 中風後遺症 <input type="checkbox"/> 腦退化症 <input type="checkbox"/> 腎病 <input type="checkbox"/> 前列腺炎 <input type="checkbox"/> 癌症 <input type="checkbox"/> 其他：_____</p> <p>ii) 照顧者有沒有肢體上的傷殘？</p> <p><input type="checkbox"/> 沒有 <input type="checkbox"/> 有 (請註明)：_____</p> <p>iii) 照顧者是否需要輪椅／助行器？</p> <p><input type="checkbox"/> 沒有 <input type="checkbox"/> 有 (請註明)：_____</p> <p>iv) 你認為自己的健康狀況屬於？</p> <p><input type="checkbox"/> 很好 <input type="checkbox"/> 好 <input type="checkbox"/> 一般 <input type="checkbox"/> 差 <input type="checkbox"/> 很差</p> <p>v) 若照顧者有其他障礙，請列明：_____</p>
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請在以下各問題中圈出您認為最合適答案

照顧壓力評估 - 沙氏負擔訪問 (ZBI)

以下 22 個項目將綜合評估病人對照顧者的情感、社會、身體及經濟方面造成的影響。每項分值 0~4 分，總分為 21~40 分表示無負擔或輕度負擔，41~60 分表示有中到重度負擔。

你照顧腦癱症患者時出現下列感受的程度：

	從 沒 有	很 少	間 中	頗 多	經 常
1. 你有沒有感到你這親人所要求的幫助過於他 / 她真正需要的呢？	0	1	2	3	4
2. 你有沒有感到因花了時間在這親人身上，而使自己時間不足夠呢？	0	1	2	3	4
3. 你有沒有因為要照料這親人，又同時要應付家庭和工作上的種種責任而感到有壓力呢？	0	1	2	3	4
4. 你有沒有為你親人的行為而感到尷尬呢？	0	1	2	3	4
5. 當你親人在你附近時，你有否感到忿怒呢？	0	1	2	3	4
6. 你有否感到你親人在你與其他家人的關係上產生負面的影響呢？	0	1	2	3	4
7. 你有否為你親人的將來感到害怕呢？	0	1	2	3	4
8. 你有否感到你親人正依賴著你呢？	0	1	2	3	4
9. 當你親人在你左右時，你會否感到緊張呢？	0	1	2	3	4
10. 你有否感到因為照顧這親人而使自己的健康受損呢？	0	1	2	3	4
11. 你有否感到你親人使你的私人空間不能如你希望有的多呢？	0	1	2	3	4

12. 你有否感到你親人使你的社交生活受到限制呢？	0	1	2	3	4
13. 你有沒有因為你親人的原故，對於請朋友到訪一事感到不安？	0	1	2	3	4
14. 你有否感到你的親人正期望你照料他 / 她，好像就只有你是他 / 她所能依靠的？	0	1	2	3	4
15. 你有沒有覺得沒有足夠的金錢去應付你自己及照顧患者的開支呢？	0	1	2	3	4
16. 你有沒有覺得沒你將不能夠繼續照顧患者？	0	1	2	3	4
17. 你有沒有覺得自從患者病發之後，你失去支配自己的個人生活？	0	1	2	3	4
18. 你有沒有希望別人能夠代你照顧患者？	0	1	2	3	4
19. 你有沒有感到不能肯定你能為你的親人做什麼事呢？	0	1	2	3	4
20. 你有沒有感到你該為你親人做更多的事情呢？	0	1	2	3	4
21. 你有沒有感到在照料你親人的事上，你其實可以做得更好呢？	0	1	2	3	4
22. 總括來說，在照料你親人上你感到有很大的負擔？	0 無	1 輕	2 中	3 重	4 極重
總分：	/88				

**24 分或以上人士可能會有較大機會患上抑鬱症 (Schreiner et al., 2006)

Appendix B

宏恩基督教學院 腦癇症照顧者生活素質研究 訪談問題

本研究由宏恩基督教學院社會工作（榮譽）學士四年級同學陳凱茵進行，旨在了解本地腦癇症照顧者的壓力與生活素質，以及探討發展相關支援服務的可行性。

此訪談內容（包括錄音和筆錄）只限本學系研究人員作統計分析之用，所有資料將以匿名形式保存和堅守保密原則。所進行的研究對訪談者不會有任何負面的影響，受訪者亦有拒絕接受訪問的權利。是次訪談內容將於完成研究後銷毀。如有任何疑問，請與負責本研究的督導老師 XXX 聯絡（電話：XXXXXXXX，電郵：sXXXXXXXX@gratia.edu.hk）。

由於參與研究屬自願性質，如閣下願意參與，懇請簽署以下同意書。

本人_____已閱讀和清楚了解明白同意書內容，並同意參與調查訪談。

參加者簽署：_____ 日期：2019 年__月__日

基本資料

1.	照顧者簡稱：	
2.	照顧者性別：	<input type="checkbox"/> 男 <input type="checkbox"/> 女
3.	擔任照顧者時間：	

訪談問題

I. 照顧者狀況

1. 現在你需要做什麼照顧工作？比起以前是越來越多，少了，還是一樣？原因為何？
2. 當你有時想或有需要離開被照顧者時，你會找其他人幫忙照顧嗎？會找誰幫忙？原因為何？
3. 若有需要找尋幫助，而你又未能找到合適的幫手，你會如何處理？

II. 情緒狀況

4. 相比以前不用做照顧者時，你覺得自己是比以前開心，現在壓力多了，還是一樣？如果有煩惱，是煩甚麼呢？
5. 你會否覺得做照顧者的壓力很大？有甚麼壓力？原因為何？你會如何處理？
6. 曾否試過當著被照顧者面前，投訴照顧他／她覺得很辛勞？被照顧者有甚麼反應？事後你有何感覺？

III. 社交狀況

7. 你會否經常與朋友聯絡（如打電話，上網聊天）？有多經常？
8. 你會否經常約朋友、鄰居、不同住家人外出？朋友約你外出，你是否多數都會去？為甚麼？
9. 你的朋友、鄰居或不同住家人會否來探望你？有多經常？

IV. 經濟狀況

10. 你覺得家裡的經濟狀況是？
11. 面對經濟壓力，你有甚麼實際行動應付日常生活（縮減飲食開支，找兼職工作，申請政府援助）？

V. 社會資源及服務使用

12. 自成為照顧者後，你接觸過甚麼政府／非牟利機構？（如急症室服務、家務助理、短暫照顧／緊急安置服務、日間照顧服務、復康巴士）是否經常使用？你從何得知這些服務？
13. 使用服務後，能否減輕你的壓力？如何幫得上忙？
14. 你認為政府或非牟利機構最好能開設甚麼新的服務以符合你的需要，對你有所幫助，或能減輕你的壓力？

Appendix C

宏恩基督教學院 腦癇症照顧者生活素質研究 職員訪談問題

本研究由宏恩基督教學院社會工作（榮譽）學士四年級同學陳凱茵進行，旨在了解本地腦癇症照顧者的壓力與生活素質，以及探討發展相關支援服務的可行性。

此訪談內容（包括錄音和筆錄）只限本學系研究人員作統計分析之用，所有資料將以匿名形式保存和堅守保密原則。所進行的研究對訪談者不會有任何負面的影響，受訪者亦有拒絕接受訪問的權利。是次訪談內容將於完成研究後銷毀。如有任何疑問，請與負責本研究的督導老師 XXX 聯絡（電話：XXXXXXXX，電郵：sXXXXXXXX@gratia.edu.hk）。

由於參與研究屬自願性質，如閣下願意參與，懇請簽署以下同意書。

本人_____已閱讀和清楚了解明白同意書內容，並同意參與調查訪談。

參加者簽署：_____ 日期：2019 年__月__日

基本資料

1.	職員名稱：	
2.	職員性別：	<input type="checkbox"/> 男 <input type="checkbox"/> 女
3.	職員加入機構年資：	

訪談問題

I. 職員狀況

1. 你日常需處理那些與腦癇症照顧者相關的工作？
2. 工作能否切合照顧者的需要？原因為何？
3. 依據現時機構的人手編制和資源，你認為足以應付全港的照顧者需要嗎？有何建議？

II. 照顧者狀況

4. 請分享你與病人／照顧者的日常的交流／故事。
5. 依你觀察，照顧者有甚麼壓力？原因為何？他們會如何處理？
6. 照顧者曾否向你／同工求助？求助內容是什麼？你／同工如何提供協助？

III. 社會資源及服務使用

7. 你認為現時政策能否照顧到腦癇症病人照顧者的需要？
8. 你認為政府或非牟利機構最好能開設甚麼新的服務以符合同工／照顧者的需要，對同工／照顧者有所幫助，或能減輕同工／照顧者的壓力？





Gratia Christian College
宏恩基督教學院

The Impacts of E-sports Training Developmental Group on Youth

An Undergraduate Honours Project

Submitted to

Dr. Mark Li

School of Social Work

Gratia Christian College

Hong Kong

in Partial Fulfilment

Of the Requirements for the Degree of
Bachelor of Social Work Programme (Honours)

By

Chan Hui Ming

May 2020



Abstract

Electronic sports (E-sports) is a growing form of team competition conducted through electronic systems and devices. With the development of technology and popularization of the Internet, electronic sports are regarded as one of the upcoming trends for youth in this generation. According to the research conducted in recent years, there are more and more young people willing to be involved in this industry with positive feedback. Also, E-sports became the demonstration project of Asian games in 2018. As a result, this gave rise to the concern of the social work field and some youth service centers started to organize E-sports related activities.

However, not all the people in our society are holding a positive attitude towards E-sports and consider E-sports may bring negative impact on youth participants while there is no consensus on whether E-sports groups in youth service bring positive or negative impact on service users. This research was conducted in the form of qualitative study while 4 youth and 2 social workers experienced in E-sport training group were invited to be interviewed. In this study, the researcher aimed to find out the impact brought by E-sports training developmental groups and conducted an in-depth analysis to explore the question of “How the group brings impact” and “Why there are different impacts on youth”. A positive result was found and different impacts on youth were discovered in this report.

Acknowledgement

I would like to give a big thanks and appreciation to all those who enabled me to complete this study. I give my thanks to my project supervisor, Dr. Li, who provided me suggestions and encouragement during the process, and helped me to coordinate my project so that I can complete this report smoothly.

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Chapter 1 Introduction

Electronic sports (E-sports) is a growing form of team competition conducted through electronic systems and devices which include online games while some may call it professional gaming (Carbonie et al., 2018). With the continuous improvement of technology in the past few years, the development of E-sports has rapidly become an emerging industry in many parts of the world. E-sports has gradually become an internationally recognized sport (Hallmann, 2018). For example, E-sports is listed as a demonstration project of the Asian Games held in Jakarta and Palembang in Indonesia in 2018. It will become one of the official competitions of Hangzhou Asian Games in 2022.

In Hong Kong, the government supports the development of E-sports which will be included in the scope of innovation and technology policies at this stage (Chung, 2018). Therefore, some youth service centers have begun to organize E-sports related activities or group activities which aim to attract young people participating in the center and to facilitate their development through the training process. However, the public responds differently. Numbers of parents still hold a negative attitude toward E-sports due to the worry of Internet addiction. No consensus has yet been reached. People tend to question the impact and effectiveness of E-sports on the personal growth of teenagers. In this research, the researcher would interview youth and social workers to explore the impact of E-sports training developmental groups on youth.

Chapter 2 Literature review

2.1 Definition of youth

The United Nations sets the age range of young people from 15 to 24 years. Different countries or regions have slightly different definitions of young people's age, but according to the Census and Statistics Department of the Hong Kong government, it defines people between the ages of 15 and 24 as a youth (Census and Statistics Department, 2013). According to the schooling system in Hong Kong, young people are at the age of fifteen when they are studying Form three and four, at the age of eighteen to nineteen when they graduate from secondary school, and at the age of twenty-three to four when they mostly graduate from college or have been working for one to two years.

2.2 Virtual community

With the development of electronic technology, those early text-based community virtual systems have evolved into virtual communities (Jäkälä & Pekkola, 2007). As the Internet has become common in our society, the information systems provide people a shared space that enable them to communicate with others and engage in meaningful collaboration in different ways, such as playing games together, chatting online, sharing daily or even meeting new friends from different backgrounds (Franceschi et al., 2009).

Additionally, games have been considered by society to provide elaborate and well-designed challenges to help players achieve a sense of accomplishment, improve concentration and gain the feeling of engagement which sometimes people may not be able to gain in reality (McGonigal, 2011).

Although online games are traditionally regarded as a form of

entertainment while E-sports is an integrated form of gaming, online games have also become a means of encouraging attention and cognition, initiative, adaptability, positive well-being, learning of new skills, correction of problematic behavior and improvement of problem-solving skills (Adachi & Willoughby, 2012).

2.3 E-sports

More than a decade ago, E-sports was defined as the field of physical activity where people use information and communication technologies to develop and train their mental or physical abilities (Wagner, 2006, p. 441). Now, E-sports is known by many synonyms while electronic sports, games, online sports, competitive cyber games and virtual sports can be defined as one kind of E-sports (Jenny et al., 2016). However, such a definition does not properly incorporate the competitive aspects of E-sports (Jenny et al., 2016). Recent definitions have described E-sports as a form of sport through electronic systems. The input of players and teams and the output of E-sports systems are realized through human-machine interfaces (Hamari & Sjöblom, 2015). All in all, they are regarded as a kind of competitive and organized computer gameplay (Witkowski, 2012).

The origin of E-sports can be traced back to the late 1990s. With the rise of the game “StarCraft”, broadband accessibility has increased, thereby establishing a strong gaming culture similar to major sports leagues (Wagner, 2006). Today, common types of E-sports include first-person shooters such as Counter-Strike (Wagner, 2006), real-time strategy games such as StarCraft (Seo, 2013), and multiplayer online battle arenas such as League of Legends (Nuangjumnong, 2015).

2.4 E-sports in Hong Kong

According to Cyberport’s report, Hong Kong’s E-sports industry currently had more than 300 000 game players, and more than half (55%) were between 18 and 21 years old (Hong Kong Cyberport Management Company Limited, 2017). At the same time, according to an online survey conducted by a youth service agency, about 10% of young people aged 15 to 29 in Hong Kong expressed interest in engaging in E-sports because

of the positive personal experience (Youth I.D.E.A.S., 2018). Achieving goals, overcoming difficulties, releasing pressure, socializing, and enjoying purpose are the reasons for young people engaging in E-sports (Carbonie et al., 2018). With these positive experiences, it is believed that E-sports training developmental group is giving great impact to youth involved. However, there are opinions on E-sports causing the issue of Internet addiction.

2.5 E-sports training

As mentioned earlier, engaging in E-sports is different from traditional sports because it is almost entirely performed by means of digital media while more emphasis is placed on connections through social media platforms (Kaytoue et al., 2012). E-sports requires players to have continuous training and learning which help players develop competitive gaming skills, communication skills, ability to cooperate with others and calmness (Seo & Jung, 2014). Research on player learning emphasizes the different stages of continuous enjoyment, struggle, achievement, frustration, and recovery of players (Kim & Thomas, 2015).

2.6 The impact of games and sports

The importance of intrinsic motivation for participating in online games and E-sports makes people understand that players believe that they can gain benefits and realize personal value through personal development in E-sports games. Research in traditional sports has also proved the intrinsic motivation for athletes to participate. The similarity of these motivations also highlights how E-sports can be used to develop a person's positive personal experience, just as sports. Active youth development is an overall framework designed to understand the power of youth (Johnston et al., 2013) and how youth have the inherent potential to await development (Holt, 2016).

Sports is a popular context for exploring active youth development in literature, because it provides an opportunity for active youth development through an environment where participants can feel psychologically and physically safe to develop interpersonal relationships, sense of belonging,

and build skills (Holt, 2016; Danish et al., 2004). In sports, youth have the opportunity to interact with mentors and peers so that they can learn important skills such as perseverance and teamwork (Holt, 2016). The benefits identified in sports research mainly cover areas of psychological and social development in areas such as teamwork, initiative, social skills, and benefits related to self-perception such as development of self-esteem, identity and personality (Danish et al., 2004; Holt, 2016; Johnston et al., 2013). There are also long-term benefits, such as adult career achievements (Fraser-Thomas et al., 2005) and interpersonal networks (MacDonald et al., 2012).

From the literature review, it is found there is limited research to explore the influence of E-sports on youth. Therefore, there is a research gap. In this study, the impact of E-sports training group on youth would be studied.

Chapter 3 Theoretical framework

Erik Erikson's Stages of Psychosocial Development

According to Erikson's psychosocial developmental theory, different stages of life will have different growth challenges. Adolescents (12-18 years old) are in the stage of self-integration (identification) and role confusion. Individuals in this stage face physical and mental changes and often feel confused about self, and if they cannot find self-identity, they will have role confusion (Cherry, 2018). At the same time, individuals in the stage of early adulthood seek for closer relationships. If an individual fails his developmental mission in building up an intimacy relationship with others, the issue of isolation and sense of loneliness or even depression will occur (Cherry, 2018). In this study, these two stages will be mostly considered based on the definition of youth.

Also, systematic and organized sports can bring positive physical, psychological, and even social development to children and adolescents; on the contrary, sports without the guidance of correct third party may also lead to their deviations including fraud, violence, and rogue behavior because they fail to accomplish their development mission in each stage (Thiborg, 2009).

Experiential Learning Theory

This theory emphasizes the orientation of learning. All learning starts with experience. In the process, through sharing and introspection, in-depth processing and transformation of experience to personal information, people verify its authenticity through practice. Continuation of another experience starts a new learning cycle (Gentry, 1990).

Through continuous experiment, practice, reflection, and

conceptualization, knowledge is created through transformation of the experience. The experiential learning cycle is divided into four stages: concrete experience; reflective observation; conceptualization; and experiment as shown in Diagram 1(Smith, 2016).

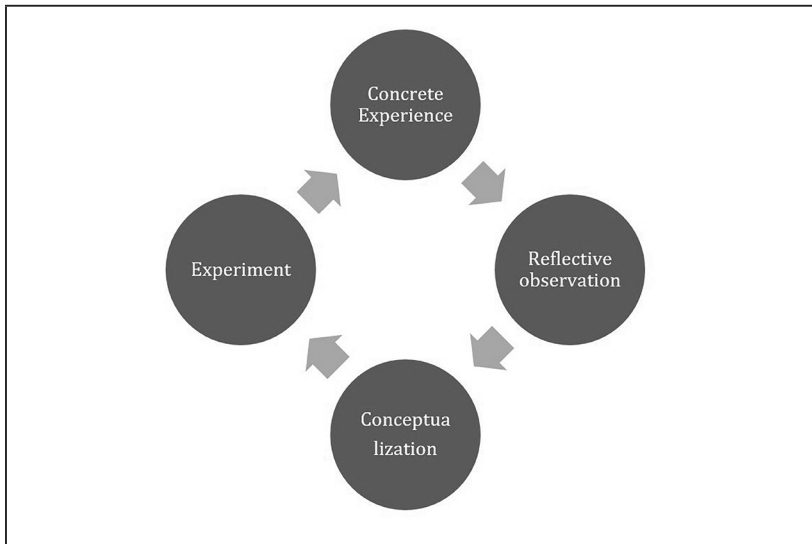


Diagram I

Tuckman’s Stages of Group Development

This theory assumes that a team cannot be expected to perform well when the group is established initially. Forming a team is like maintaining a relationship. It takes time, patience, support, and effort while members usually go through recognizable stages that change them from being a collection of strangers to a unified group with common goals. Based on these assumptions, Bruce Tuckman proposed a five-stage model: Forming, Storming, Norming, Performing and Adjourning to form, develop, maintain and finally terminate a group (Zhen, 2017).

This research aims to study what impact will be brought to youth in a group work setting. It is believed that the developmental stage of the group may give us a clearer vision and group members in each group stage

may get different experiences or meet different challenges which may bring impact to the group members. Researcher tried to discover if different group development stage in E-sports training group may bring different influences to youth members. In the following, this study would use this model as one of the theoretical frameworks to analyze the data collected.

Chapter 4 Research methodology

This research is a qualitative study with the use of semi-structured in-depth interviews, which helps to deeply understand the inner feelings of youth when participating in the E-sports training group and their learning during the entire training process, as well as to understand if the integration of E-sports training into social work service can bring greater impact on youth and how it works.

4.1 Research objectives

Aims

The aim of the study is to explore and to have a broader discussion on the impact on youth brought from the involvement in E-sports training groups in youth work setting.

Objectives

1. To undergo a review of relevant literature and to study what impact was brought by the E-sports training developmental group to the youth members
2. To strictly review and list out the perspectives and opinions of the interviewees based on the interview transcripts
3. To further analyze what factors changed and manipulated the impact of the E-sports training group on youth members

4.2 Research background

In this study, it is assumed that the E-sports training developmental

group brings both positive or negative impact on youth members. At the same time, the group is developing and members are getting experience during the process of participating in the group which is based on experiential learning, and in development stages of the group. Coupled with the framework of Erikson’s psychosocial development stages, all together form the theoretical background of this research.

4.3 Research method

4.3.1 Participants

Qualitative research method was used. Focus group approach was applied in the study. Youth who actively participated in the E-sport training group and social workers were recruited in the study. Researcher has good social networks with these groups.

Four youth interviewees who had participated in the E-sports training group and two social worker interviewees who had experience in organizing this type of group were invited to attend an interview session with the researcher. Interview guides are attached as Appendix A and B. Their background information useful in this study are shown in Tables 1 and 2 as below. Consent was got before interviewing (Appendix C).

Table 1: Information of youth interviewees

	age	Sex	Status	Experience in E-sports group	Way of recruitment
Youth interviewee 1	23	M	Working	2 years	Outreach by researcher
Youth interviewee 2	19	M	Studying	2 years	Friend introduction
Youth interviewee 3	17	M	Studying	4 to 5 years	Outreach by researcher
Youth interviewee 4	18	M	Studying	0.5 year	Friend introduction

Table 2: Information of social worker interviewees

	Experience in E-sports group	Service Field
Social worker interviewee 1	2	Youth
Social worker interviewee 2	3	Youth

4.3.2 Online interview

The proposed interview was conducted face to face. However, because of the situation of COVID-19, the interview was conducted through the internet and then recorded.

4.4 Research limitation

There were several limitations to this study. First, face to face interviews had been failed to conduct due to the situation of COVID-19. Second, the study only recruited four male interviewees because the invited female interviewee refused to come due to personal reasons. Third, the research was limited to one district due to limited resources and temporary closure of most of the youth centers as a result of COVID-19. Also, the research was limited to qualitative research method and no quantitative data were collected.

Chapter 5 Data Analysis

5.1 Findings

This study aims to discover the impact of E-sports training developmental groups on youth. After conducting interviews with 4 young people and 2 social workers, the researcher had different discoveries based on the content of the interviews. In the following, the findings will be listed out.

5.1.1 Expand social circle in real life

According to the interviews, all interviewed youths who had participated in the E-sports training groups said that the groups effectively expanded their social circle, mainly because the groups were composed of youth from different backgrounds with the same goals and passion, that made them easier to develop social relationships with each other. Moreover, they also mentioned that the experience of participating in different competitions and related activities helped them gain more social experience with others which enabled them to expand their social circle in real life.

As mentioned by youth interviewee 3, he was not interested in school life before he joined the E-sports training developmental group and he seldom went to school. After joining the E-sports group, he built up a better relationship with his classmates because he shared the same interest in E-sports with his classmates, that motivated him to go back to school.

Also, both interviewed social workers shared that there were several cases that youth members expanded their social circle in school after joining the groups and they reported that it was mainly because of their improvement in communication ability.

5.1.2 Better emotional control

“Different from the old days, I started to be aware of emotional control, and after participating in E-sports training developmental group, now I will make use of a different method to cope with my emotions to prevent people in my surrounding from suffering”; “Learned how to transform and accept negative emotion”; “The reviewing session in the group helped me discover my emotional issues”. These were answers from youth interviewees when asking them how E-sports training group influenced their personality and real life. The E-sports training developmental group has promoted youth’s ability in controlling emotions.

Based on the data collected, it was found that the experience brought by the group enabled the group members to directly face up their emotions. As mentioned by youth interviewee 4, *“The reminder given by the instructor and social workers in the debriefing session allowed me and my groupmates to review and share our feelings while helping me learn how to transform and accept those negative emotions.”* Also, social worker interviewee 1 claimed that the experience of winning and losing allowed social workers to get in touch with the emotions triggered by the youth and to intervene immediately, and this kind of intervention helped a lot in promoting service user’s ability in emotion control.

5.1.3 Acceptance of failure or success

When asking about the learning of winning and losing experience in the group, youth interviewee 2 said that he learned that life was not just a game while everyone had their advantages and disadvantages in different work or study. The experience of winning and losing let him understand victory or being good at something was not a must, but the most important part was the attitude towards failure. Learning from failure would make his life more fruitful and meaningful. Additionally, other youth interviewee also agreed that the training group facilitated their acceptance of failure. A youth interviewee 1 said, *“I learned how to accept failure and not giving up easily”*, and interviewee 4 answered that the experience enhanced his confidence in not being afraid to face up failure but focusing on how to put more effort in the future process to avoid losing again.

According to these responses, there is no doubt that the competitive

elements and the process of seeking success in the group were helping them to have a positive view of both failure and success. Also, both social worker interviewees mentioned that those competitive experiences helped them to provide feedback to youth in debriefing sessions to make them reflect what made them win and understand that failure was inevitable and indispensable during our lifetime to achieve goals.

5.1.4 Sense of accomplishment

Referring to the interview with youth interviewee 3, he emphasized that the training group gave him a sense of accomplishment. He claimed that the process of organizing and completing the competition with his team members made him feel a sense of accomplishment which he could seldom gain in his school life.

Based on the theory of Erikson's Psychosocial Developmental Stages, this sense of accomplishment is necessary for youth to build up their sense of self or personal identity, or otherwise youth in this stage may suffer in role confusion. As mentioned in the theory, good completion of each developmental stage may result in positive personality and behavior. In contrast, failing to overcome the crisis produces problematic behavior. However, youth interviewee 3 shared his experience of not having many opportunities in school or daily life to gain accomplishment or to explore his ability. It is believed that there are numbers of students with different talents but not good in academic performance may also suffer from the same issues and not be able to explore their own identity in school because of the examination-based education system in Hong Kong. In this case, youth interviewee 3 shared his experience in gaining a sense of accomplishment in the training group by joining several E-sports competitions and being a team leader during the process.

5.1.5 Enhanced learning motivation and initiative

There were several occasions that the interviewees started to mention their changes in real life after participating in the E-sports training developmental group during the interview. Researcher discovered that one of their common changes was their increase in learning initiative. Youth interviewees 1, 2, and 3 reported that the training group made them become

motivated to learn new skills and knowledge in real life. At the same time, the two social workers interviewed stated that many service users did become more active in daily life and learning after participating in the group. The two social workers cited different case examples. For example, students became more active in school after participating, or unemployed youth were determined to work hard after being motivated to join the group. However, the two social workers explained they believed that the rewarding experience in the group let them get the feeling of success and happiness which they usually did not have in daily life or study, so they gained confidence in learning new things.

Additionally, when the topic came to a memorable scene in the group, youth interviewee 3 mentioned that the visiting, learning, and sharing experience in the group enabled him to take the initiative to seek for advice to improve or learn new skills in real life. He underlined that the sharing experience after E-sports competition or training made him realize that his friends around welcomed his sharing and the successful learning experience improved his self-confidence to being active to learn from others and stick to his interest. Also, other youth interviewees claimed that taking more initiative than the past was one of their changes during the group process.

5.1.6 Ability of self-reflection

Social worker interviewee 1 mentioned in the interview that the main expectation and purpose of organizing the E-sports training group at the beginning was mainly to improve youth's ability to set life goals, self-awareness, self-reflection and improve their self-understanding to enable them to regain their interest in learning and put their effort in real life.

As mentioned above, one of the desired objectives has indeed been achieved, but it does not mean that other objectives will also be achieved at the same time. It is needed to know if the group members were affected or changed after they had participated in the group. In the part of self-reflection ability, it is not difficult for the researcher to revisit the content of the interviews and discover that all youth interviewees emphasized they were trained in a team approach during the training process, which enhanced their self-reflection ability. Compared with playing games alone,

they claimed that team approach forced them to avoid blaming teammates but think about how they could play as a better leader role in the team and progress together with teammates. Besides, all 4 young interviewees mentioned that the review and commentary part of the group allowed them to understand their strengths and weaknesses, thus starting to change their thinking mode to self-reflection instead of blaming others as in the past.

5.1.7 Improved communication skills and teamwork

“As the members in the group come from different backgrounds and age groups, I learned different ways to communicate with others”, youth interviewee 4 responded. The development of the virtual world helps people to have shared information and break the limit of text-based community. As a result, as one form of the virtual community, E-sports can recruit people from different backgrounds and this generates a good opportunity for group members to get in touch with different people which help them to improve their communication skills.

Moreover, the E-sports games require teamwork while teamwork depends on communication to complete a task. In the interview, youth interviewee 2 said, “Coach and social worker discovered that I was passive and refused to communicate with teammates at the start of the group, and their positive guidance and interpretation during the group process enabled me to start the conversation with other teammates to win games”. He also said that the training group made him learn how to communicate with others and become more daring to share feelings with others. It showed that the communication elements in E-sports encouraged youth to have more experience in communicating with others. Moreover, the reviewing session in the training group also helped youth members to find out their communication issues and then find a solution to fix them. Similar to youth interviewee 2, youth interviewees 3 and 4 mentioned that they improved their communication skills and became more willing to communicate with others as well.

While all interviewees agreed on the E-sports training group in helping them to improve communication skills, they also connected the communication skills to teamwork and claimed that the team approach of the group encouraged them to cooperate with teammates and discovered

their specific position/role in the team.

5.1.8 Goal setting and career planning

Goal setting was one of the initial objectives mentioned by social worker interviewee 1. It is believed that E-sports training group may help youth to have a better understanding of the E-sports as a new industry and to enhance their ability on career planning. Also, the competitive element involved in E-sports game may help them set up a clear goal for them to achieve during the process.

Based on the content of the interviews, it is believed that the training group has greater impact on enhancing youth's ability to set a goal. As mentioned by youth interviewee 3, *"The group changed me as I used to play games only in the past. Now I am more willing to learn different things and I have a clear goal which motivates me to overcome different challenges in reality"*. Based on the feedback from the interviewees, the competitive elements and systematic training did help youth members to set up their specific goal and pay their effort to achieve it. It is believed the positive experience in goal setting and achievement during the group process helps the youth know how to clarify their identity and find out their ability to set up a visible and viable goal for themselves. However, some youth interviewees did not mention the group help them with goal settings but only claimed that the experience in the group process helped them to get more knowledge about E-sports.

5.1.9 Responsibility and Self-demanding

"There will be higher sense of responsibility in life than before, and at the same time, I become more willing to pursue my work, hoping that what I have learned can make me do better and faster.", *"I become more responsible to others in real life as I discover that my irresponsible behavior may affect others."* These were changes mentioned by the youth interviewees while youth interviewees 1 and 3 emphasized on this when they were asked if there was any change after they had joined the group. Additionally, youth interviewees 1, 2 and 3 mentioned that they became more self-demanding after participating in the group. While asking them the reason behind, their answers were similar which were related to the

process of seeking victory.

5.1.10 Better relationship with family

Also mentioned in the interviews, youth interviewees 1 and 3 indicated that their family relationship became better after participating in the training group. They explained that it was mainly because they showed their family that they took a serious attitude towards the E-ports group and being more responsible during the process. They believed that their positive changes in the process were one of the reasons that their family relationship became better. Also, the researcher found that both interviewees made commitments to their families and began to communicate more with their family members. Researcher believes that the E-sports training team not only helped young people understand themselves and grow up through training, but also the involvement of social workers allowed parents to know more about their children at the same time, which improved their relationship.

As mentioned by youth interviewee 1, his family began to greet his participation in the group and the results of the competition when his parents realized that E-sports was not an activity which wasted time but something he was interested in and willing to do better. He claimed that the group became a platform for him to share his feelings with his family to achieve mutual understanding at the end. Moreover, the youth interviewee also mentioned that he had more communication with his family while he participated in the group.

5.1.11 Leadership

In the interviews, the improvement of leadership skills was also mentioned. Among the two interviewed teenagers who served as captains in the team, they said they learned how to lead the team and take care of other members. Youth interviewee 3 mentioned that the reason why he was promoted to be the leader in the process of the group was mainly that the group allowed him to practice, which he did not usually have in school or daily life, and the group provided him an opportunity to try to be a leader. Also, youth interviewee 1 stated that as a team leader, he learned how to deal with the relationship between people and cooperate with others, and

would have more contacts with the leading social worker to communicate and report on the status of the team and members which allowed him to learn how to lead the team in the process. Although youth interviewee 2 was not the leader in the team, he was also dedicated to learn from his team captain on how to lead a team as he thought that he was not good at leading a team.

Before jumping to discussion, the summary of the impact of E-sports on the interviewees can be referred to appendix D.

5.2 Discussion

5.2.1 Explanation on impact brought

After listing the above findings, it is not difficult to find that most of the group's impact on young people comes from the group experience. For example, the young people interviewed said that they had learned leadership skills and social skills in the group. These changes were due to their experience as a team leader to lead the team and the opportunity to socialize with others in the game. However, this does not mean that young people can have the same learning as long as they have the same type of experience in other situations. The researcher found that the seriousness of the group will be a key factor that affects whether young people can be affected by the group.

When asked about what was the difference between an E-sports training group and normal gaming, no matter they were young people or social workers, all of them pointed out that the seriousness and systematic training in the group were very different from gaming in general. At the same time, they also mentioned that the group was more targeted than daily games. It is believed that their serious attitude towards the E-sports training group enabled them to learn and reflect on their group experience.

Moreover, according to the experiential learning circle, 4 steps are required to complete the entire learning process: Concrete experience, Reflective observation, Abstract conceptualization, and Active experimentation. Researcher found out that the entire content of the E-sports training team contained the important elements of the above steps.

Based on the data collected, it is found that E-sports training groups include E-sports training, reviewing sessions, sharing sessions, competition, and visiting activities. With these fruitful contents, it is believed that each group member may have their specific concrete experience. After providing youth a concrete experience, the reviewing and sharing session with the guidance of social workers may enable youth to reflect their experience during the process, and conceptualize their reflection. Lastly, the practice opportunity in competition may allow youth to have their active experimentation which results in their positive learning.

5.2.2 Factors affecting the impact of E-sports training groups on youth

In the process, it is expected that teenagers will be affected differently due to differences in experience. However, when collecting data from the interviews, the researcher found a question worth discussing, that is, what are the factors which affect the differences in the impact of the E-sports training group on young people. The researcher analyzed that the length of time that the young people participated in the group, their role and their intention would lead to different effects on them.

Take the four interviewed youth as an example. Among them, interviewee 4 had only half a year's experience in participating in the E-sports training group and the others had around 2 to 5 years' experience. Revisiting the content of the interviews, when the youth who received the E-sports group training for a shorter period, then, the group's influence on him was mainly emotional management, social skills, and initiative while other youth who participated in the group for a longer period mentioned some other impacts bought by the group such as family relationship, sense of responsibility, personal awareness, self-reflection, and sense of accomplishment. Additionally, it was also obvious that the group required both time and effort to develop from forming to later stages. In this case, as mentioned by youth interviewee 4, he only participated in a total of 8 group training sessions and it was obvious that the group stuck in the Forming stage. In contrast, other interviewees with a longer period of participating in E-sports training group had experienced their group development and gained experience in different group development stages including Storming, Norming, Performing, or even Adjourning as mentioned by

youth interviewee 1. In the process, they learnt how to find their role, communicate and cooperate with each other, resolve conflict, and develop their strength so as to achieve the goal. As a result, it is believed that the longer period of participating in the E-sports training group, there will be more impact brought by the group as there will be more learning experience.

Not only how long the youth participated in the training group may affect the impact of the group, the youth's role in the group matters as well. Referring to the findings mentioned, both youth interviewees 1 and 3 were the captains of their team and they claimed that this role in E-sports training enhanced their ability in leadership and cooperation with other people. Additionally, the youth interviewees emphasized that being a captain in the team enabled them to have more chances to get in touch with the social worker to report the group learning process and their daily life. They believed that this experience also made them more responsible for others in real life. While other two interviewees were not the captain of their team, they mentioned that their role as a learner and supporter helped them to take more initiative to speak for their feelings and thoughts which help their team to improve in the reviewing session.

Referring to the interviews conducted, both youth interviewee 3 and 4 regarded E-sports as an industry that they wanted to be involved in the future as a career and they joined the E-sports to gain more understanding about the industry. At the same time, interviewees 1 and 2 were dedicated in their interest in E-sports and enjoyed playing with teammates who had the same objective in winning while they did not expect themselves to be involved in the industry as their career in future. In this case, researcher discovered that both youth interviewees 3 and 4 with the same intention mentioned that they learned to take more initiative to ask questions and share experience with others while the other two interviewees focused on the initiative to express their feelings and thoughts. So, it is suggested that the youth's intention of playing E-sports may make them perform differently in the group process and get different learning experiences as a result.

Last but not the least, the researcher also discovered that the age of the participant might affect learning in the group. Based on the stages

of psychosocial development, youth aged 12 to 18 are searching for self-identity while youth aged 19 to 30 may seek an intimate relationship with others. Put youth interviewees 2 and 3 as examples, when the researcher reviewed the interview content, youth interviewee 3 emphasized on the sense of accomplishment gained while youth interviewee 2 focused on how he built up a strong sense of belonging and the group helped him to avoid the feelings of loneliness. As a result, it is believed that the age of the youth may affect the group's impact on them as well, or in another words, the group satisfied interviewees' different needs in different developmental stages.

5.2.3 The involvement of social workers and instructors

To explore this issue, the theoretical background of this research plays an important role. First of all, in the experiential learning cycle, young people not only need concrete experience to complete the entire learning process, in the process, whether they can reflect on the experience from different angles and turn the experience into concrete concepts is also very important. The participation of social workers and instructors in the group helps them to gain specific experience and they will be guided in the review section and sharing time, which enables them to have different impacts. On the contrary, if there is no guidance from a third party during and after the game, the youth may not be able to connect the learning from the game with reality and gain specific impact in their real life. Just as various interviewees said during the interviews, daily gaming was different from the E-sports training group while the atmosphere was much more serious and the involvement of social workers enabled them to learn. In the interviews, several youth interviewees mentioned the involvement of social workers and regarded them as important supporters in the group to help them learn from their experience and negative emotions.

Also, as mentioned above, different stages of group development can bring youth participants different influences. However, in each stage, the team will face different challenges and targeted activities are needed for the group to evolve from one stage to another. Therefore, a leader with clear guidance is needed in the group. In the early stage of the group, the social worker could effectively arrange appropriate activities and lead discussions as the leader to let the group progress to later stages after the formation

period. Then, members were able to focus their effort for the development of the group, and social workers could guide the group members to grow and learn in the process.

In addition to the above, youth in adolescence and early adulthood may require support from the surrounding to accomplish their developmental mission. As a result, the involvement of social workers and instructors can be seen as crucial persons in the group who will be able to provide support or affirmation to them. Moreover, their appearance in the group may also help youth members to gain accomplishment while giving them positive guidance to explore their self-identify, and build up trustful relationships with youth with commitment and care.

5.2.4 Combination of E-sports training and Social work elements

During the process of collecting data in the interviews with these interviewees, researcher gradually gained a deeper understanding of the E-sports training group and also analyzed different effects of the group on teenagers. However, the question of why should we combine E-sports and social work always appears in the researcher's mind. Finally, the process of collecting data and communicating with these experienced youth participants and social workers in this study allow the researcher to answer this difficult question. Of course, young people's feedback gives the researcher a clearer direction. At the same time, revisiting the feedback from the social workers provides the researcher with an initial answer.

As mentioned by social worker interviewee 1, "E-sports is likely to trigger emotions among them. In the process of review, youth learn more in reflection and finally try to change themselves or improve problematic behaviors. I believe that it is because the experience in the group is specific for them and easy to linkup with a realistic example." Also, both social worker interviewees mentioned that not every youngster received a positive experience in school. There was always a reason causing them to hide in the virtual community and E-sports training group was no doubt a suitable group work to reconnect them to reality and real life. Analyzing through these feedbacks, the researcher believes that E-sports training developmental groups can provide a number of intervention opportunities. That is the reason why we could link social work with E-sports.

Additionally, the researcher discovered that both social worker interviewees emphasized that social workers should be innovative and hold activities that were suitable for service users but not merely repeated the same group work expecting the same result. At the same time, the researcher found that compared with traditional activities, youth believed that E-sports training group was more attractive and brought greater and more impact on them.

Chapter 6 Conclusion

6.1 Conclusion of the findings

To conclude this study, the overall impact of the E-sports training developmental group is positive based on the data collected. All of the interviewees regarded that the E-sports training developmental group brought positive influences towards themselves or their youth service users.

Additionally, after a long process of analyzing the data collected from the interviewees with theories, it is believed that the impact of E-sports training developmental groups on youth can be affected by several factors including participant's intention of joining the group, duration of participation, roles taken in the group and their own age/developmental stage. At the same time, the participant's attitude towards E-sports training would directly affect if they can gain positive learning from the fruitful experience provided by the group, and the impact of the group is mainly a result of the concrete experience and their reflection during the group process.

Last but not the least, the data collected also tell us that both social workers and instructors are playing an important role to bring about these impacts to youth members and their involvement may stimulate and facilitate youth's reflection and learning. Moreover, this study not only verifies that E-sports training group brings positive impact to youth but also its attraction and innovation to this generation, while this type of group contains numbers of concrete and valuable experiences for youth which help them to reconnect from virtual community to reality and having actual changes.

6.2 Other thoughts and reflections of the researcher

This research is no doubt a valuable experience for the researcher

to discover the positive impact of the E-ports training group on youth and seek a deeper understanding of the E-sports group through the process of analyzing why and how the E-sports training group can bring positive impact to youth. However, there are still many myths about E-ports training in youth service awaiting further investigation and study as it is a new and innovative project just started in Hong Kong's social work field and there is little local research conducted. For instance, it is suggested by the researcher that specific studies such as "how E-sports can promote youth's resilience or mental wellness" can be conducted while these studies can help the community gain a better and deeper understanding of E-sports and its applicability in the social work field.

Moreover, there are several issues that the researcher thinks that are important and interesting but not be able to conduct in this study due to the limitation of available interviewees and resources. First of all, the researcher is curious if the gender of the youth may also affect the impact brought by the group while it is known that there are more and more female youth involved in the E-sports training group. However, because of the limitation of available interviewees while two female youth interviewees rejected the invitation due to clash of examination period, as a result, the researcher in this study was not able to find out the answer in relation to gender difference. Second, the researcher initially wanted to study if the location of the youth center might affect the impact brought by the group work. Unluckily, the researcher found many resources including time, money, and network were required while it was impossible for the researcher to conduct interviews in 18 different districts in Hong Kong. Last but not the least, also due to the limitation of resources, there was no quantitative data collected in this research while the researcher initially had prepared a self-esteem scale and a mental capacity scale to measure the changes due to the group intervention.

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Appendix A: Question prepared for interview (Youth)

**訪問前準備問題
青少年部分**

Age:

Education level:

Employment/study status:

你是如何參與和認識到電子競技小組？

為什麼一開始會有興趣參與電子競技小組？

你參加小組時家人知悉嗎？

當家人知悉後，他們有什麼反應？

你認為參與電子競技訓練小組與平常自己 and 一班朋友玩遊戲有什麼分別？

你認為你自己一個在家玩遊戲會有像電競小組中的學習嗎？

可以分享一下電競小組除了玩電子遊戲之外有什麼特色？

參與小組時，你通常會扮演小組中的什麼角色？

你認為你的角色有令你在小組中有什麼不一樣的學習或者體會嗎？

競技遊戲當中強調勝敗，當中面對的失敗有否曾令你在過程中想放棄？

如有，最後你又為什麼會堅持？

當中勝負既經歷有冇令你學習到除了遊戲知識以外的東西嗎？

你自己認為參與小組的過程中，你在現實中也有所成長嗎？最大得著又是什麼？

你覺得小組既經歷有沒有令你的生活或性格受影響或者改變？你認為是正面還是負面呢？

最後，你認為電子競技訓練小組與傳統的小組活動有什麼不同之處？

Appendix B: Question prepared for interview (Social worker)

**訪問前預備問題
社工部分**

服務單位：

服務類別：

為什麼會有想法去推行電子競技小組？

你有多少年帶領這類小組的經驗？

曾經帶領過多少次電子競技小組？

電子競技訓練小組主要是哪一類服務對象？

設計小組主要的期望和目的是什麼？

小組的內容主要包括什麼？

當中有什麼最深刻的經歷？

青少年在小組的角色有什麼特別影響？

競技遊戲中強調勝敗得失，你認為勝敗的經驗對服務使用者有著什麼的影響？

你認為參與電子競技訓練小組的服務對象最大得著是什麼？

你認為參與電子競技小組有否對他們的生活有什麼改變或影響？整體而言是正面還是負面？

小組當中會有什麼限制存在嗎？

Appendix C: Consent Form

參加研究同意書

本人經由研究者的說明，瞭解此研究的目的與意義，願意參與此研究，並同意以下事項：

- 一、我願意在此研究中擔任受訪人。
- 二、在訪談中我有權利決定是否回答研究者所提出的問題及回答的深度。
- 三、我明白研究者將對於我的個人身分予以保密，並在文字敘述中刪除足以辨識個人背景資料的內容。
- 四、我同意訪談過程時全程錄音，並同意錄音內容轉為逐字稿。在確認逐字稿內容無誤後，同意研究者進行資料分析。
- 五、研究進行中，研究者會對訪談錄音帶作妥善保管，避免外流，並在論文完成後銷毀訪談錄音帶及逐字稿。
- 六、我同意在保護個人隱私、並經過我事先確認的條件下，允許研究者於論文中摘錄文稿並在論文中提及。

如有任何疑問，您可隨時撥電話號碼 _____XXX_____ 與 XXX 聯絡。

參與者簽名：

簽名日期：

研究簽名：

簽名日期：

Appendix D: Summary of Impact on youth

Impacts\Interviewee	1	2	3	4
Family relationship	✓		✓	
Social skill	✓	✓	✓	✓
Emotion control	✓	✓	✓	✓
Acceptance on failure	✓	✓	✓	✓
Sense of accomplishment		✓		
Ability on self-reflect	✓	✓	✓	
Communication skills & Team work	✓	✓	✓	✓
Setting goal and career planning		✓	✓	
Responsibility and Self-demanding	✓	✓	✓	
Leadership	✓		✓	



Gratia Christian College
宏恩基督教學院

How Hong Kong women caregivers perceive their caregiving work in the family?

An Undergraduate Honors Project/Thesis Submitted to
Mr. Li Kim Chuen
Gratia Christian College
Hong Kong

In partial Fulfillment of the Requirements for the
Degree Bachelor of Social Work (Honors)

by

Lam King Hung

April, 2021



Abstract

The purpose of this research is to draw attention to women caregivers who have caring burden at home, and to explore their stress and needs as well. It is necessary to provide them care and support. Caregivers' stresses include physical, psychological, economic and social stress.

This study used qualitative research method in the form of semi-structured interviews with seven women caregiver informants, to understand their caregiving work and explore their future plans.

Keywords: women caregiver, caregiver burden, future plan, gender

Acknowledgement

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Chapter 1. Introduction

1.1 Introduction

In recent years, many caregivers committed suicide because of stress from their caring work. Most of the caregivers were women. They work hard to take care of their children, parents and in-laws. These caregivers are mainly daughters, spouses or mothers, and they are women. They work hard to contribute to the family, but they receive little support. They always take care of their family in a lonely way.

In this research, I want to investigate women caregivers' daily work, and to understand how they face their problems. Moreover, I hope this research can satisfy my curiosity about women caregivers' thoughts. I hope this research can help people know more about women caregivers' thoughts and to arouse the public's attention to women caregivers' situations. Let the research study transmit a significant message to more people and the public.

Chapter 2. Literature Review

2.1 Number of Caregivers

According to “Feature articles: Persons with disabilities and chronic diseases in Hong Kong”, there were about 203 700 carers living with people who were disabled, and there were 175 600 carers living with patients with chronic diseases (Social Statistics Branch, 2015). Also, the Report of “Thematic household survey report no. 40: Socio-demographic profile, health status and self-care capability of older persons” stated that 133 400 elders living at home needed help in their daily lives (Social Surveys Section, 2009).

On the other hand, the statistics from the Education Bureau (<https://www.edb.gov.hk/en/edu-system/special/index.html>) showed that there were increasing numbers from 7 752 in 2016/17 to 8 270 in 2019/20 of students including primary and secondary schools with special education needs. Moreover, according to the survey of “Thematic Household Survey report no. 56”, it reported there were 654 400 people who were home-makers or caregivers (Social Analysis and Research Section, 2015).

2.2 Defining Caregiver and Gender

Caregiver means a person caring for a loved one in their home or family, the care recipient’s home or an institutional setting. It may include attending to an individual’s physical health or emotional well-being. Moreover, it may also include long-term caregiving for people who have physical disability or chronic illness.

In traditional Chinese societies patriarchy was very common. Status, property or money belong to men and inheritors. Men dominated (Westwood, Ngo & Leung, 1997, p.44). Meanwhile, the education opportunity also belonged to men. Chinese has a concept about women -

“A woman who lacks talent is virtuous”. Women didn’t have any chance to study in the olden days.

In recent years, society has been improved and changed. Many women can find their own jobs. According to the statistics from the Census and Statistics Department, it showed that the number of women in the labor force was more than male in 2019 (Census and Statistics Department, Social Statistics Branch, 2020). Women thought that participating in the job market could help them become independent (Women Commission, 2010). Meanwhile, the number of women having a post-secondary education level (including degree and non-degree programs) increased from 161 800 in 1986 to 1.01 million in 2016 (Census and Statistics Department, Social Statistics Branch, 2020).

However, there are some arguments that although Hong Kong women have changed their social status, for example, they have a chance to be educated, social attitudes are still traditional. “Survey on Community Perception on Gender Issues” by Women Commission in 2009 mentioned that more than 51% of the respondents agreed that women should put more emphasis on family than career. That means there is still a traditional stereotype about the role of women in Hong Kong.

2.3 Type of Caregivers

According to the report of Hong Kong Federation of Women’s Centres (2011), it defined three main types of women caregivers: Spouses, Children and Parents.

2.3.1 Spouse

Qureshi and Walker (1989) pointed out that social norms influence who becomes a caregiver according to kinship and gender. When the male elderly cannot take care of himself, the main caregiver is always his wife, followed by the daughter-in-laws and children; if the elderly is female, the main caregiver is daughter-in-laws, followed by children and husband.

2.3.2 Children

In general, the scope of care provided by female adult children to their frail elderly parents includes changing clothes, feeding, bathing, toileting, resting, walking around in the house, and taking care of their emotions. However, men will focus on financial expenditure or home repair. Their role is a participant and decision-maker, and they care less in daily work.

2.3.3 Parents

For the children, most people believe that taking care of children is the parents' duty. If the child is disabled, the main care responsibilities will belong to the parents.

2.4 Caregiver Burden

The definition of caregiver burden can be divided by the subjective and objective load. The objective load refers to the time spent by the caregivers in carrying out care-taking activities, while the attitude and emotion of caregivers is subjective (Bull, 1990).

In Hong Kong, the society is changing and progressing. However, the role of women does not change. They still need to care for their family. Women have a double burden when they go to work and take care of their family. Most of the researches or surveys found that women perceived more stress and burden than men (Thompson & Walker, 1989), or men perceived less burden than women. These are consistent with gender role theory (Sanders, 2007). Also, caregiver burden can affect emotions and mental health and would have symptoms such as sadness, anxiety, helplessness, uselessness and so on (Binstock & George, 1990).

In some countries or cities such as Hong Kong, women do the bulk of unpaid care work. According to the International Labour Organization (2018), women spent 4.1 times more in Asia and the Pacific Rim in unpaid care work than men.

2.5 Role Theory

The role of women in society has been predefined in cultural and physiological terms in being weak and too puny to handle certain kinds of work. So, women are restricted to be a wife, mother and take a filial duty/role. In recent years, due to feminist and gender equality, women are empowered. Women's status changes from the tradition of patriarchy to becoming having social roles and personal roles at the same time. They have opportunities to find their own work or have freedom to develop their own interests.

However, Moen (1991) believes that although social attitude about women has been changed, the historical and traditional definitions of gender still affect the development for both sexes and the responsibilities for women is still mainly taking care of the family. This will limit their participation in areas outside their family. Moreover, Worell and Remer (1992) believe that the socialization of gender roles will make women balance work and family, but men are less concerned. Gove (1972) believes that men have two roles in marriage, which are husband and bread winner; and women whether they are employed or not, their roles are housewife and caregiver. There was a survey from the Women's Commission in 2010, which stated that 50.4% of people considered that "women should focus more on family than work". It shows that women are still commonly stereotyped as family carers nowadays.

Chapter 3. Methodology

3.1 Research Objectives

- (i) To investigate how female caregivers perceive their caregiving work, and
- (ii) To explore female caregivers' future plans when they are free from caregiving duty.

3.2 Research Target

In this research, target informants were women caregivers and they were classified into three types: parent, child and spouse. Informants came from researcher's friends and Wise Fanling. Therefore, the method of sampling was purposive sampling.

3.3 Research Method

In this research, qualitative research using semi-structured interview was adopted. The interviews were conducted from February 2021 to March 2021 and seven women caregivers participated in the in-depth interviews. The interview places were in the Hong Kong Federation of Women, Centre of Wise Fanling or in some quiet place. Also, the interviews were about one hour. During the interviews, open-ended questions were used.

3.4 Research Sample

Seven women caregivers were invited to join the research study. They were the researcher's friends or members of the Hong Kong Federation of Women. Most of the caregivers had been caring for over 5 years or above. Among the seven informants, two caregivers were caring for their spouse; two caregivers were caring for children, two of them had cared for

their deceased parent and the last one was caring both parent and children (appendices 1 & 2). For the interview questions, there are three parts: caring experiences and understanding, future plan and other opinions (appendix 3).

3.5 Coding

In the research study, C represents caregiver. 01 represents informant number one and 02 represents informant number two and so on.

3.6 Informants' Background

3.6.1 C01

CO1 was a 45 years old woman caregiver. She took care of her two normal children (7 years old daughter & 4 years old son). She lived with her husband and children in Tai Po. She also had two parents not living with her. She was at junior high school level. She had 6 years of caregiving experiences.

3.6.2 C02

CO2 was a 51 years old woman caregiver. She attained secondary 3 education level. She lived with her husband and his parents. She had been focusing on taking care of her husband's parents, aged around 80, with chronic illness for 8 years. Her husband needed to work.

3.6.3 C03

CO3 was 55 years old with Form 5 education level. She lived with her husband and her parents. She needed to care for her parents with chronic illness and they were aged 67 (father) & 62 (mother) respectively. She had been taking care of them for about twenty years.

3.6.4 C04

CO4 was a 60 years old woman caregiver and she had attained Bachelor Degree education level. She had taken care of her mother with lots of disease, such as Meniere's disease, and dementia for 30 years before her

mother died. Now, she lives alone.

3.6.5 C05

CO5 was a 73 years old woman caregiver and she had attained primary 4 education level. She lived with her 81 years old husband with cancer. They had 3 children but all of them had been married and moved out, so only she took care of her husband.

3.6.6 C06

CO6 was 57 years old and lived with her husband and two children in Tai Po. She graduated in Form 5. The older son was 24 years old and he was intellectually disabled. The younger son was normal. Her husband needed to work so she took care of them.

3.6.7 C07

CO7 lived in Failing. She was 40 years old and lived with her husband and two normal sons. One was 5 years old and the other was 3 years old. She had Form 5 educational level. She had been taking care of her sons for 3 years. Her husband needed to work.

Seven informants were interviewed. One of them was caring for her spouse, one of them had cared for her own mother, one of them was caring for her own parents, one of them was caring for her in-law parents, two of them were caring for their normal children, and the last one was caring for one disabled child and one normal child. Moreover, most of them had secondary education level or above.

Chapter 4. Thematic Analysis

4.1 Finding of Question 1: What is your experience on caregiving?

4.1.1: Caring was an endless job

In the interviews, most of the informants said that their caring work was very hard. Some of them said that it was an endless job without salary.

“I have to look after their (her children’s) homework. I am very busy, as I have to buy vegetables and cook while I am looking after them...and now there is an epidemic situation, I help them wear a mask, and disinfect whenever going outside; after we come back home, disinfect and clean again for about an hour, and buy vegetables and cook again. I feel very hard and tired...my work doesn’t stop. It is endless and tiring.....taking care of children doesn’t have time-limit, and 24 hours are needed to take care of them no matter if I sleep or not.” - C01

Women caregivers took care of their children from day to night such as C01, and women caregivers who were caring for their spouses and their parents were the same. They needed to bring them to have follow-up consultations and take care of them 24 hours as well such as C02, as she said, *“I need to bring them (in-laws) to have follow-up consultations and I am taking care of them 24 hours as well”*.

Another informant C05 also had the same situation:

“I feel very tired and he (her husband) needs to have follow-up consultations nearly every week. Last week, I was very busy. I went to four hospitals...I needed to go to Alice Ho Miu Ling Nethersole Hospital (AHNH), and I had the schedule of follow-up consultation and he had a blood test before the consultation. The North District Hospital (NDH) found he had a tumor, and gave him a follow-up consultation ... The fourth was an eye

hospital. His eyes needed to have an injection and also had a follow-up consultation. So, I always bring him to have follow-up consultations.”

4.1.2: Caring work was physically demanding

Caregivers had a lot of physical labor in their daily caring work.

“I have to assist my in-laws to move from A place to B place. I am afraid he will fall down in the street ... I will buy vegetables as fast as possible. If they go to the toilet, I will also help them because I am afraid they will fall. I also help them bathing in the bathing room.”- CO2

CO6 had similar opinions. She said *“I take after my elder son's daily life because he is intellectually disabled, and teach him self-care.”*

“I go to the hospital because of his trachea problem.”- CO5

“When my children go to school, I will finish my housework as fast as possible.” – CO7

From the caregivers' information, their daily work not only included the house work such as buying vegetables but also going to the hospital with their family members like CO6 for surgical operation or follow up consultation like CO2 and CO5.

In conclusion, all of the women caregivers had the same type of household chores but different content of caring work. For example, as mother, taking care of children's daily activities; as spouse or wife, escorting family members in their follow-up consultation. In sum, all are heavy duties.

4.2 Finding of Question 2: How does this caregiving work affect you?

4.2.1 Feel pressure in daily life

When women caregivers had to do lots of endless work for a long period of time, they felt some pressure in their daily life. CO6 and CO7 had to care for the same target. No matter if the child was a normal child or a child with an intellectual disability, they felt a lot of pressure as well.

CO7 said, *“During the early stages of the Covid 19, I stayed at home with my two children every day. My mood also became low. I was ruffled by them. Sometimes, my neighbor heard my loud voice when I shouted and screamed at my children because I was stressed and emotional”*.

On the other hand, CO6 said, *“I am tied up. Two of them stay at home, and I use all my power to take care of them. I have to finish all the housework before they come home from school...I felt very much pressured when he was 2 to 3 years old. I wanted to help him follow the schedules...”*.

Moreover, informants who were caring for their spouse also had the same situation as CO5.

“I have a lot of stress now. Taking care of him, I feel nervous. When you look at me, I seem to be normal, but I feel very stressed. Sometimes, when I was on the train, I asked myself whether I had turned off the stove at home or not. Sometimes, I forgot to bring the keys and went to Alice Ho Miu Ling Nethersole Hospital (AHNH) with my husband for medical consultation.” - C05

No matter which type of targets the informants were taking care of, they had paid a lot of time to care for them. However, they also received lots of stress and caused some mental or emotional problems, such as nervousness or agitation. Moreover, in the situation of CO3 and CO2, sleeping disturbance also occurred.

4.2.2 Lack of social network

When women were caring for their family, their social network would become narrow because they needed to care for their parents or children from day to night.

“I lose my private time because I have to look after my mother and father-in-law. Only I look after them. I do not have time to contact my friends.” - C02

“Because of the need to take care of my mother, I had no time to travel, hike, meet friends, and have narrow social network.” - C04

4.2.3 Feel guilty

“I couldn’t help her (her mother) in medical treatment, and I was afraid she couldn’t take care of herself. When I had to make decision for her, I was very pressured because I was afraid making a wrong decision. For the elderly, sending her to hospital to have some checks such as blood check, lungs check and so on was very hard and she had difficulties in sleeping. If not, I was afraid her situation would become worse. If my decision could let mother have nothing worse, I would become relaxed; however, I was afraid to have made a wrong decision, because she would go to hospital, and I did not want her to have any pain or difficulty. ... I had some guilty feelings in my heart that I had cared for her not so good, not enough....” - C04

In conclusion, the informant lacked the basic medical treatment knowledge so she felt guilty whether she had made some wrong decisions for her mother in receiving hospital treatment.

4.2.4 Financial expenses

Women caregivers had to take care of their family. However, some of them such as CO3 applied for no paid leave when their parents were sick and had to be sent to hospital. She said, *“Because my parents had to go to the hospital for an operation ... I had to apply for no paid leave to take care of them.”*

For the worse situation, some caregivers such as CO4 & CO5 had to resign from their job and became full-time caregivers.

Women caregivers were caring for their parents or in-laws with chronic illness, their financial burden increased due to the cost of follow-up consultation or surgical operation.

4.3 Findings of Question 3: How to handle this burden?

If women caregivers had a lot of caregiver burden, they will find formal or informal support.

4.3.1 Formal support

CO7 mentioned, *“I contacted a social worker when I had stress”. I shared my feelings with the social worker and he analyzed my situation for me. Also, he liked to role play with me. For example, he asked me, “If I see this happens, what would I do?”*

4.3.2 Informal support

CO3 remembered and said, *“My worst situation was when my parents were in the hospital. I was very worried and it affected my emotions, and I had insomnia at night. Then I talked to my friends or my husband to reduce my stress.”*

In summary, women caregivers found solutions when they were burdened and felt stress, nervousness or guilt. They would handle their stress by formal support such as approaching professional people like social workers as they had professional skills to help them; the other was informal support such as their friends and their husband.

4.4 Finding of Question 4: What is your opinion about caregiving work?

4.4.1: Responsibility/Filial piety

Although caring work experience was negative, and some thought it was an annoying job, causing a lot of burdens and was physically demanding as said by CO7, informants still had similar thoughts about their caring work.

CO1 said, *“Kids are a gift given to me by God. I should cherish it. Taking care of them is my duty, no matter how hard it is. I have to endure it. This is my responsibility and I have to bear it. I hope I can try my best to take care of them.”*

Having the same care target, CO6 also had the same opinion. She said *“It is my responsibility. Parents should be responsible to care for them until they can be independent.”*

Another informant, CO3, had the same opinion. She said, *“My parents took care of me when I was young, now they have become older and I must take care of them. The Chinese say it is filial piety. We should take responsibility to take care of them”*.

In the interviews, no matter which type of target they were taking care of, all of them thought that caring work was their responsibility and duty; they had to take this responsibility to care for them. One of the reasons was because of Chinese filial piety or religious belief. Another reason was responsible for the pledge of marriage, as said by CO5. They accepted this responsibility to care for their parents, in-laws, children and spouse.

4.5 Finding of Question 5: What are the objectives of your future plan?

4.5.1: Fulfill their interests and needs

No matter how caring work is an endless job, women caregivers will have time to take a rest in the future. The respondents hoped to plan for the future when they felt free.

“I attended cooking lessons before. They taught people how to cook; after that, I wanted to learn how to make dessert, then I joined the dessert lessons. At that time, I did not live with my in-laws. Now, I have no time to develop my interest, so I have stopped my plan.” - C02.

CO6 also had a similar opinion. She said, *“I want to implement this plan at least after 10 years ...I like to learn musical instruments or artwork, but now I have no opportunity to learn. Learning musical instruments is my interest. When I was young, I wanted to learn this but I had no resources to learn.”*

The other informant CO3 also mentioned, *“Many people thought that after they married, they would save money and enjoy their own life. I want to have my own place to develop my interest; I want to be free.”*

Further, CO4 said, *“Because I have to take care of my mother, I have no time to go for a trip, mountain hike, or meeting friends; and I lack social*

support.”

In conclusion, women’s plans were stopped because they had an endless job. As we can see that no matter taking care of a normal child, intellectually disabled child, or taking care of in-laws, parents or husband, women caregivers might have their direction of their future plan. They hoped they could fulfill their interest and needs in future.

4.6 Finding of Question 6: What is the meaning of your plan?

4.6.1: Enhance self-capacity

There are some reasons behind the future plan. CO2 said, *“I don’t want to be a worker. I want to be myself, upgrade myself and to be full of substance.... I want to keep up with the time. That’s why I want to operate an online store and it can raise my self-confidence”*

CO6 had the same reason. She said, *“Learning musical instruments is my interest. If I can learn successfully, I can develop myself.”*

Like CO2, she wanted to be happy and learn new things.

4.6.2: Restore the social connection

“Job can help me to know more about the society; not always stay at home to face my children. In recent years, I know less about the society because I don’t work outside. I feel that I am disconnected with the society.”
- C01.

CO2 and CO5 also mentioned the same situation.

“I don’t want to be disconnected with the society. I don’t know everything because from day to night, I have to take care of them non-stop.”
- C02.

“People liked to chat with me, and I could help them. I helped people that made me happy, that is why I was a voluntary mentor in a coffee shop. Now I cannot do it because I have to take care of my husband.” - C05.

In conclusion, increasing self-technique, reducing social disconnec-

tion and raising self-confidence were the main reasons. During their caring work, they had no time to develop their interests or techniques; and they could not get any information/news from their friends.

Chapter 5: Discussion

5.1 Who is the main caregiver?

Gender plays a very important factor in influencing who would be the caregivers and their related behaviors. Daughter, wife, sister or mother were assumed to be responsible for taking action for caring; son, husband or other male were responsible for earnings (Phillips, 1989). The caregiver is always regarded as the family member who has the responsibility of monitoring and providing care to the care recipient in order to meet the daily needs in the home environment. Generally speaking, women are to take this caregiver role. The first one is mother, then, the spouse, the daughter or daughter-in-law and the granddaughter is the last one to take the caring responsibility. According to a survey in Taiwan (Taiwan Association of Family Caregivers Association, 2007), spouse (wife) is the first choice to take this responsibility, the daughter-in-law is the second one and the last one is daughter.

In the interviews, all of the women informants were the only caregivers. The women caregivers are caring for their families as their responsibility and they shoulder all the caring responsibilities silently. In Chinese society, women are generally regarded as the primary caregivers of the family. Even in Hong Kong today, women are the main caregivers in their families. There are some reasons that women become the main caregiver in the family.

5.1.1 Traditional culture's gender stereotype and division of family labor

The first one is the husband has to go to work, and then the wife will take the responsibility to take care of the family members such as children or in-laws. As a result, women have the main responsibility to take care of the family. Except home repair, all the rest is the responsibility of the

women. Man takes up the responsibility for repairing work, which matches the gender stereotype role of a man, being physically and technically abler to do home repair (伊慶春、高淑貴, 1986).

5.1.2. The Concept of “men are breadwinners, and women are housekeepers”

In Chinese traditional culture, the male serves as a breadwinner, and female serves as a house-keeper (Thompson & Walker, 1989). Nowadays in knowledge-based economy society, women’s statuses in Hong Kong have been increasing but it does not mean that they are completely liberated from the traditional roles (叶一知, 2015). In our seven women caregiver informants, 4 women’s husbands had to go to work; their wife became housekeepers and caregivers at the same time. As daughters such as C03 always have closer relationship with their parents, if parents are old, their daughters would take up the responsibility to care for their parents.

5.1.3 The society’s insufficient support for caregivers and its impact

Although there are childcare services and neighborhood support child care programs in the community, both of them are not enough to alleviate the burden of child caregivers based on the Annual Report of the Hong Kong Association of Women’s Center in 2019-2020. Lack of social support, women caregivers and their family members may have some psychological or physical pressure. As mentioned by the informants, they had taken care of their family members for a long time in a lonely way. Their social and leisure time was reduced and they suffered from physical strain.

In summary, family care work had always been regarded as labor of showing love, and women were always assumed to be suitable caregivers. This is a gender-based division of labor and causes the phenomenon of feminization of care work. Taking care of children when they were young; taking care of parents and parents-in-law in middle age; taking care of spouses in old age, and even being considered as the best solution for taking care of their grandchildren. Many women are responsible for this kind of unpaid family care work throughout their lives.

5.2 Stress on Caregivers

Hong Kong Women Workers' Association, Hong Kong Federation of Women's Centres, New Arrival Women League and Tin Shui Wai Community Development developed a platform to do a research in 2013, it found that some of the women caregivers used an average of 12 hours to take care of their family every day. In Taiwan, some women also spent an average of 14 hours taking care of their families (台灣內政部行政院勞工委員會, 2011). As a result, we can see that women are caring for their family with times more than the normal working hours. Whatever type of work, women suffer from long-term stress which brings them health problems.

5.2.1 Physical effects

We can see that most women become caregivers. They might have sleeping problems, be tired and suffer from lumbago, and feel pain in the chest after they have been taking this role for a long time without taking a rest. According to a survey from the Hong Kong Women Federation of Women's Centre, it found that the most common symptoms occurring in women caregivers include tiresome, sleeping problems, and difficulty in concentration (Hong Kong Federation of Women's Center, 2011, p. 8). The findings were the same as mentioned by the women caregiver informants in this study.

5.2.2 Psychology effect

Besides physical problems, women caregivers also bear a lot of emotional problems, like feeling guilty and irritated. In Hong Kong society over the past few decades, the structure and function of the family has undergone major changes. In addition to the gradual decrease in family size, family relationships have also changed (Cherlin, 2004). Lacking family and social support, caregivers' psychological problems have no way to be solved.

5.3 Attitude towards Caregiving Work

The education level of the caregiver is directly proportional to the caregiver's evaluation of the care work (Kosberg, et al. 1990), which means

those with higher education level will have a higher positive level about their evaluation of caring work. As a result, we can see that the six women caregiver informants having junior high school or above had positive opinions about caring work. There was still one informant, CO5, who didn't have junior high school level, but she also had positive thinking. The reason might be that she had family support. As she said, "*My sons and daughter are helpers; they will help me when they are free, which means they can help me reduce my stress. They also come to visit us once every week...*". In addition, positive emotions can occur when there is a positive relationship between children and parents. CO5 had built up a good relationship with her children. Good family relationships and support made CO5 develop more positive thinking and emotion.

Moreover, women caregivers used positive ways of thinking to reduce their stress, such as responsibility, love, and filial piety.

5.4. Seeking Support

Under great pressure, the informants tried to approach other people for assistance or support; no matter it was formal or informal. Psychologists point out that talking can adjust people's emotions and coordinate the functions of various organs of the human body. As a result, we can see that most of the female caregiver informants found people to share their problems in order to reduce their stress, or even help them to get out of the trouble or stress.

5.5 The Future Plan of Women Caregivers

The mostly given reason for the informants to consider their future plan was to help themselves raise their techniques/skills through the implementation of their plans so that they could reconnect with the society. They wanted to have freedom, relaxation and self-development. The result showed that women put their goal not only on their caring work but also on developing their own ability or talent. A report in Taiwan "Innovation women in the new future" revealed that around 70% of women wanted to set the goal of life as "personal expertise or interest". Besides, they hoped they could find job interest. As we can see, women have developed their

own ability based on their job interest in Taiwan (衛生福利部社會及家庭署, 2020).

5.6 Difference between Traditional and Present Day Women

5.6.1 The women role

There were some sentences describing women. In a traditional poem, it states: “A woman who lacks talent is virtuous 女子無才便是德”. No matter in the Industrial Revolution of the 19 century or in the Chinese Han times, the family was patriarchal. Women’s status was low. Traditional gender role reinforced women to be the caretaker in the family and the men’s role was to provide financial support as the breadwinner of the family (Larsen & Long, 1988; Brewster & Padavic, 2004). Due to a lack of congenital physical strength, women had an unconscious sense of inferiority in the labor-intensive society in ancient times. They had no idea about their future plan and were willing to accept their low status. Moreover, in the past, women often played the caring roles of mother, daughter, daughter-in-law and wife at the same time. Society generally had the stereotype of strong men and weak women.

However, society moves forward. The number of women having higher education has increased (Bolzendahl & Myers, 2004; Goldin, 2006). The percentage of women aged 15 or above with junior high school level was 50% in 1986; 72% in 2006 and 74% in 2009 (Census and Statistics Department, Social Survey Sections, 2010, p. 50). So, among the seven informants, all of them had primary education level or above, and one of them had college level (Appendix 1).

Women are not just caregivers but also have other roles. Women gradually step out into the society. To overcome the inferiority complex of the past and devote themselves to the development of a more determined mind, women will think of another role in the future, such as student role, tutor role, online shop manager, YouTuber, and so on. They want to connect and compete with others in the society. According to a survey from Taiwan, 47% of women expected to play well in all the roles in their life (衛生福利部社會及家庭署, 2021)

5.6.2 Women caregivers see the values of their life

Women caregivers faced many difficulties in their caring life. They had not given up caring work and knew how to respond to life with a positive attitude. They understood and cherished life and were willing to take up the responsibility of taking care of their families and then expanded their life mileage. There was a survey from Taiwan saying that 44% of women could find their job interest (衛生福利部社會及家庭署 , 2021).

Chapter 6: Implications

6.1 Challenge of women caregivers

Women caregivers caring for their family can be more overwhelmed. According to the interviews, some challenges are identified that caregivers will face in their life.

6.1.1 Stress and worry

They spent a lot of time managing the caring work. Some of the informants had sleeping problems and stress. If they suffer from stress and worry for a long time, their mental health might be affected. Anderson et al. (2013) found that 65-years-old caregivers or older ones had higher consciousness of health and frequent mental distress than younger caregivers. Different types of carers had different kinds of worries. C05 was a child's caregiver, and she needed to care for her children with intellectual disability. She always worried about the insufficiency of residential service for her child. On the other hand, C07 was also a caregiver of normal children, and she always worried about the children's behavior problems.

6.1.2 Social isolation

As we know that most of the informants spent a lot of time in their caring work, it was hard to find leisure time to develop their interests or hobbies. If her disabled children could not get the residential service, then informant C06 had to care for her child and could not have any social activities until her child was admitted to the hostel for the disabled. The informant C05 needed 24 hours to take care of her husband suffering from cancer. As a result, women caregivers had little chance to meet their friends, as they had to care for their family for 24 hours per day. If women lack social support networks, it will cause them a greater sense of helplessness

and a higher chance of developing mood disorders, such as anxiety or depression. Moreover, social isolation can also induce mental health problems like depression or anxiety.

6.1.3 Low self-esteem

Women carers' self-esteem would be affected seriously. It was because they thought that they themselves were not worthy of care and attention. All their time should be focused on the person they took care of.

6.1.4 Financial problem

In the study, we know that women caregivers had to pay extra money to care for their family like expenses on medical follow up and cost of hospitalization. If they did not work, it might create financial burden.

6.2 Suggestions to the Government

Women caregivers face a lot of stress when they look after their families, but they seldom express their opinions to the Government. According to the responses of Question 3, their solutions are formal support and informal support. Here are some suggestions that the government can help them tackle their problems.

6.2.1 More government support

From the interviews, most of the caregivers did not know what resources could help them in the future. One of the informants had made decisions by herself without any professional help. She felt guilty in making inappropriate medical decisions. Hong Kong lacks caregiver support. By the end of 2019, the total number of places available for respite care and daycare could not meet the needs of 200 000 carers living with the disabled. C05, one of the informants, wanted the government to build more institutions for the disabled in her living district Tai Po. She had been waiting for the residential service for a long time.

6.2.2 Provide caregiver allowance

In the study, some of the informants did not have jobs and they needed to support the expenditure of medical follow-up, and hospitalization of their family members. The Community Care Fund (CCF) of “Pilot Scheme on Living Allowance for Carers of Elderly Persons from Low-income Families” was operated in June 2014. The scheme not only welcomes carers of elderly persons from low-income families, but is also open to carers of children from low-income families.

Besides the above funding, the Government should take reference from other countries about caregiver policy to improve caregivers’ quality of life. For example, the Finnish Government allows caregivers to apply for additional funding to hire private caregivers to relieve the burden of family caregivers. Moreover, in the United Kingdom, Australia or Taiwan, they provide some living allowance or remuneration for caregivers to recognize the labor value of their work and appreciate caregivers for their contribution in alleviating social welfare service demand.

6.3 Suggestions to Caregivers

6.3.1 AFFIRM

AFFIRM (Rew et al, 1989) is a model which is prepared for a new caregiver to reduce stress arising from the caring work. The content is about caregiving knowledge or assessable medical resources. It is classified into five parts as below:

Availability: The resources around caregivers that they can take or use. For example, they can find a social worker to share their stress issues.

Formulation: Assist caregivers to develop home care planning and set up a schedule for daily activities.

Factual: Teach some caregiver knowledge and technologies. For example, teach them to be more empathetic to elderly.

Referrals: List out the available medical resources for emergency situations, and phone calls to emergency health care workers.

Monitoring: Monitor caregivers and care recipient situation. Social workers can provide follow up services for women caregivers.

6.3.2 Resources in services

Although some of the informants relied on their friends or husbands to handle their stress, they did not seek professional help to solve their problems. Women caregivers should seek help from social workers. Social workers can arrange suitable caregiver courses and support groups that can help caregivers raise their caring quality. Also, most of the non-government organizations have counselling services and emotional support hotline services for people if women caregivers need help.

6.3.3 Find the free time to relax

Caregivers need to find some time or short period to relax in order to pick up energy. Doing relaxation and breathing exercises can decrease depression and anxiety.

Chapter 7: Conclusion

7.1 Caregivers' Needs

Women caregivers faced lots of stress during their caring work. Those stresses came from physical and psychological sources. However, half of the informants used their own methods to solve their problems. If they finished their caring work in the future, women hoped to focus their interest or learn some techniques in order to equip themselves and connect with the society again.

7.2 Social Worker

Most of the informants firstly found their friends to solve their problem, secondly chose to find social workers to help them. Social workers are professional helpers. They have some resources, such as counselling services, and support groups that can help the caregivers.

7.3 The Opinions of their Caring Work

Women are engaged in caring work. Caring work is not paid, but is hard, and has a lot of stress. However, respondents thought that caring work was their responsibility and duty, and they needed to take this responsibility. Although the caring work was hard, they still did it.

Chapter 8: Limitations of the research

8.1 Relationship with the informants

Researcher did not know the informants before, so they might not truly and fully express their negative feelings or thoughts. As a result, their opinions might be more positive.

8.2 Interviewer and interviewee experience

As the researcher was the first time to conduct the interviews, questioning techniques were not good sometimes. Moreover, the informants did not have any interviewing experience, so they were nervous at the beginning of the interviewing process.

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Appendices

Appendix 1: Caregivers' background

	Age	Education level	Family Numbers	Year of caring	Target of caring person		
					spouse	children	In law/ own parents
C01: Wendy	45	F. 3	4	6 Y		2	
C02: Yu	51	F. 3	4	8 Y			2
C03: Tsang	55	F. 5	4	20 Y			2
C04: Tong	60	Degree Level	1	30 Y			1
C05: Ching	73	P. 4	2	50 Y	1		
C06: Wai	57	Form 5 Graduated	4	24 Y		2 (1 disabled)	
C07: Yee	40	Form 5 Graduated	4	5 Y		2	

Appendix 2: The reasons for being caregivers of the Informants

Code	Name	Number of persons cared for	Reasons
C01	Wendy	2	Her husband was busy, and had no time to take care of children. Only she fulfilled the responsibilities of wife and mother.
C02	Yu	2	Her husband was busy, and no time to take care of family. Only she fulfilled the responsibilities of wife and daughter in law.
C03	Tsang	2	She was the oldest sister and took up the biggest responsibility to take care of her parents with chronic illness.
C04	Tong	1	Her brother lived in Shenzhen. She was person who had to take care of her sick mother.
C05	Ching	1	She took care of her sick husband. Three children grew up and moved out.
C06	Wai	2	Her husband was busy to work. She took more responsibilities to look after her 2 children.
C07	Yee	2	Her husband was busy to work. Sometimes, he worked overtime. So, she took more responsibility to care of her 2 children.

Appendix 3: Interview Questions

Interview guideline

1. 照顧者性別：
2. 照顧者年齡：
3. 照顧者教育程度： 小學 初中 高中 大專或以上
4. 家庭成員數目：
5. 主要收入來源：
6. 經濟收入狀況： \$10,000 以下 \$10,000 – 15,000
 \$15,000 或以上
7. 與受關顧者的關係：
8. 受關顧者被照顧時間： 1 年或以下 1 年 - 3 年
 3 年或以上
9. 受關顧者年齡：
10. 受關顧者的情況：

Interview questions

第一部份

1. 為何是由你來照顧？
2. 之前有沒有照顧人的經驗？
3. 你對於照顧家人有何感受？
4. 你是否對於照顧人有所壓力？如有，如何處理？
5. 照顧者這份工作對你有何影響？
6. 對你來說，照顧工作是甚麼？

第二部份

1. 將來當家人不用你照顧時，你有何計劃？
2. 為何這個計劃是在你有空時才可以進行？
3. 如何發展你的計劃？
4. 這個計劃有何目的？
5. 這個計劃對你有何意義？
6. 是否會使用政府或社會資源來進行你的計劃嗎？

第三部份

1. 還有什麼想分享？



Gratia Christian College
宏恩基督教學院

A Quantitative Research on the Influence of Parenting Styles of Hong Kong Dual Parents on the Self-esteem of their Children aged 12-17

An Undergraduate Honours Project
Submitted to

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of the Requirements for the Degree
Bachelor of Social Work (Honours)

by
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Abstract

With most of the previous research talking about the correlation of parenting styles and children's self-esteem being done in the Western culture and context, this research aims to explore different parenting styles and their influences on children in their adolescence in the Hong Kong context. The Rosenberg Self-Esteem Scale (RSES) was used to measure the self-esteem of target students in a local government-aided school (Pentecostal Lam Hon Kwong School), while the Parental Authority Questionnaire (PAQ) was used to measure the parenting styles. Several subjective questions were specially added to the questionnaire to see if there was any significance. Due to the influence of COVID-19, online consent forms were distributed to 349 of the Target school's students and their parents from 23rd February to 7th March 2021. 124 students agreed to participate in the research. Online questionnaires were distributed and collected via Google Form from 1st March to 15th March 2021. After data validation, 119 of the questionnaires were being analyzed. SPSS was used for statistical analysis and showed that the mean RSES score among students was 26.0420, which was above average. Authoritative Parenting Style provided a significantly strong and positive influence on the children's self-esteem, while Permissive Parenting Style provided a small but positive influence on the children's self-esteem. For Authoritarian Parenting Style, it caused a strong and negative influence on the children's self-esteem. Maternal influence was stronger than paternal influence in enhancing children's self-esteem. Some recommendations are made for adolescents, parents, and families, while the cultural, social, political influences and family dynamics can be addressed in future research and studies in Hong Kong concerning this topic.

Keywords: Adolescents, authoritarian, authoritative, permissive, self-esteem, parenting styles, Hong Kong

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CHAPTER ONE – INTRODUCTION

Rationale for Study

Parenting issues are a popular topic in the world, and parenting styles are being studied in previous research to show how they correlate to children's behaviors and self-esteem. According to Peterson and Green (2009), family plays an essential role in the emotional, physical and social development of individual family members. They can provide close emotional support that can help cultivate children to be self-confident and well-adjusted. Three models of parental control, including Authoritarian, Authoritative and Permissive were developed by Baumrind (1966). She in her later research found four basic elements that could help shape successful parenting, which are responsiveness vs unresponsiveness and demanding vs. undemanding (Baumrind, 1967).

In Hong Kong, more people started to be aware of the parenting styles and their effects on the children's self-esteem. So, there was gradually more local research concerning the correlation between parenting styles and their effects on the development and self-esteem of their children. Local research showed that parents giving love and care to their children are the first step to enhance their self-esteem (生命及倫理研究中心 , 2017). Also, from another local research, over 70% of the respondents, who were parents, responded with 'strongly agree' or 'fairly agree' on Authoritative parenting style towards their children, as most of them in the research thought that using Authoritative parenting style was the best method towards their children during daily lives. Also, the four parenting styles were discussed in that research. However, it did not state clearly the correlation between parenting styles and their children's self-esteem (香港研究協會 , 2017).

On the other hand, titles concerning parents that tend to use an Authoritarian parenting style like ‘tiger parents’ (虎爸虎媽), ‘monster parents’ (怪獸家長) and ‘helicopter parents’ (直升機家長) became more prominent during the past few years to their children (狄, 2011). However, such approaches offer great pressure to their children, especially academic stress.

The above information shows that using an Authoritative parenting style seems to be more popular among Hong Kong parents and will have a more positive effect on the children’s overall growth and development and their self-esteem, while using a stricter, more Authoritarian parenting style may lead to negative effects on the children’s self-esteem and development. Also, the researcher observes that his friends’ self-esteem is mostly affected by their parents’ parenting styles, such as when they adopt more Authoritarian and Permissive parenting styles, their self-esteem is generally lower. More, the researcher hopes to commit to youth and family work in the social work field upon graduation and to pursue a Master of Counselling. In order to investigate it more in Hong Kong society, this motivates the researcher to conduct a quantitative research to examine how different parenting styles from Hong Kong dual parents affect the self-esteem of their children aged from 12 to 17, and the research’s respondents will be adolescents who are studying in secondary school.

The most significant point of this research was targeted at the students from the researcher’s graduated secondary school - Pentecostal Lam Hon Kwong School, as similar research has not been done there before. The secondary school’s Principal and the school’s administration board all showed their support to the researcher to conduct the research there to collect data for analysis. This helped the formulation of discussions and recommendations in social work practice in this report. The findings also further enrich the previous research studies about the correlation between parenting styles and children’s self-esteem in adolescence.

CHAPTER TWO – LITERATURE REVIEW

Parenting Styles

Diana Baumrind (1966) first set up Three Models of Parental Control (Authoritarian, Authoritative, and Permissive). Santrock (2017) states that the models from Baumrind affect the behaviors of children. Baumrind then later found four basic elements that could help shape successful parenting in her later research. The elements are Responsiveness vs. Unresponsiveness and Demanding vs. Undemanding (Baumrind, 1967). Maccoby and Martin (1983) further expanded Baumrind's three original parenting styles into two main categories, which are: Demanding and Undemanding, leading to the definition of Four Parenting Styles (Authoritative, Authoritarian, Permissive, and Neglectful).

Authoritative parenting style is defined as a high level of warmth and demandingness; Authoritarian parenting style is defined as a low level of warmth but a high level of demandingness; Permissive parenting style is defined as a high level of warmth and low level of demandingness; Neglectful parenting style is defined as low level of warmth and demandingness (Alsheikh et al, 2010; Baumrind, 1989, 1991; Maccoby & Martin, 1983)

Parents who adopt an Authoritative parenting style have high expectations for their children, but they will usually encourage their children to express themselves and will have a warm and supportive manner and provide more extensive verbal communication for their children to negotiate with them if necessary. Children can develop a sense of independence and will tend to listen to their parents more often. They can also learn how to express

themselves to their parents easily when under this parenting style, and the self-esteem among them will be usually enhanced. However, children from Authoritarian, Permissive, and Neglectful parents will tend to have lower self-esteem and will be more timid, more dependent, and may show resentment towards their parents as their opinions were often disagreed or neglected by their parents, and their needs are not being fulfilled often when their parents do not have the awareness to pay attention to listen, accompany them and allow them to express themselves (Rosenthal, 2009; Yun et al., 2019).

Self-Esteem

Self-esteem is the basic foundation of an individual's psychological state. Its definition is an individual's subjective opinions towards himself, including positive and negative thoughts towards himself (樹洞香港, 2020). According to Abraham Maslow's Hierarchy of Needs (1954), he classified people's needs into five categories, from the bottom to the top level - they are physiological needs (also called basic needs), safety needs, love and belonging needs, esteem needs, and needs of self-actualization. In esteem needs, people will hope to develop bonding with others, and their opinions matter. Also, people will hope to gain achievements, independence, and respect to achieve self-actualization.

Psychologist Dr. Michele Borba (2012) classified self-esteem into 5 different categories (The Five Building Blocks of Self-Esteem), which are security, selfhood, affiliation, competence, and mission. For security, it means an individual can feel comfortable, relaxed, and safe, know what is expected, being able to depend on individuals and situations, and comprehend rules and limits. A feeling of strong assuredness occurs among them. For selfhood, it means an individual can acquire self-knowledge, including accurate and realistic self-description of sources of influence on the self. A feeling of individuality has occurred. For affiliation, the individual will experience a feeling of belonging, acceptance, or relatedness, particularly in relationships that are considered important. For mission, a feeling of

purpose and motivation in life with self-empowerment through setting realistic and achievable goals. For competence, an individual will have a feeling of success and accomplishment in things important, be aware of strengths, and be able to accept weaknesses.

Adolescents

According to the World Health Organization (2021), ‘Adolescents’ are defined as individuals between 10 and 19 years old. Erikson (1958, 1963) classified ages of people into 8 different stages in the model of Erik Erikson’s Stages of Development. The stage ‘Adolescence’ are in Stage 5 which occurs around 12 to 18 years old. Erikson thought that this stage is important to the process of forming a strong identity and developing a sense of direction in life. The individual wants to belong to a society and fit in, and the success of overcoming this stage will lead to the virtue of fidelity (McLeod, 2018). In Hong Kong society, according to Cap. 410 Age of Majority (Related Provisions) Ordinance, 2018, an individual is defined as a majority (or adult) when he or she attains the age of 18 years. Thus, the age range of adolescents in Hong Kong is around 12 to 17 years old.

Previous Research Findings in Other Countries

Yun et al. (2019) from the University of Sains Malaysia conducted a quantitative study of the relationship between parenting style and adolescents’ self-esteem. They explored the effects of Malaysian parenting styles on the self-esteem of the adolescents, and the target group aged from 13 to 17. Two questionnaires, the Parental Authority Questionnaire (PAQ) and Rosenberg Self-Esteem Scale (RSES) were used and distributed to 500 students from a national type secondary school. SPSS was being used to analyze the results. The research’s findings showed that Authoritative and Permissive parenting style has a small and negative correlation with adolescents’ self-esteem, while Authoritarian parenting style has a small and positive correlation with self-esteem.

Three researchers from the United Arab Emirates also studied parenting styles and the influence on adolescents' self-esteem and student performance, and their research direction was focused on mainly the adolescents' GPA scores (Alsheikh et al., 2010). They quoted various previous studies from different locations and were aware of the cultural influences among the Arabic, Western and Eastern world, and they found out that many studies attempting to substantiate Authoritative parenting style had a positive impact on children development while Authoritarian and Permissive parenting styles had a negative impact on children's functioning, including self-esteem, academic performance, emotional maturity, etc. These three researchers then conducted a quantitative study in their research, in which 162 children (50% boys and 50% girls, including elementary and secondary school students)'s data were being collected and analyzed. It was composed of two inventories for measurement: Parental Style Inventory II (PSI-II) and the Rosenberg Self-esteem Scale (RSES). However, they found out that self-esteem was not significantly related to any of the variables studied in the research (Alsheikh et al., 2010).

In short, both of the research studies were comprehensive. They deeply reviewed the three parenting styles by Diana Baumrind and could describe and explain the differences and characteristics of each of the parenting styles. They were also aware of the cultural differences from the Western world, so they made the hypothesis that different cultures and regional contexts had different impacts on parental styles and other variables. They let people who are living in other regions and countries, to know how Authoritative parenting style may or may not strongly correlate with their children's self-esteem, and provide an insight that cultural background is one of the significant factors that determine whether Authoritative parenting style brings out positive effects to adolescents. Their results were not as similar as the Western research, which often found out that the Authoritative parenting style will bring out a positive effect on their children's self-esteem in their adolescence. Also, their results pave the foundation of this research, which allows the researcher to examine more about the correlation between different parenting styles and their children's

self-esteem in Hong Kong.

Previous Research Findings in Hong Kong

A local quantitative research studied the relationship between Hong Kong parents' parenting styles and their children that were studying in kindergartens, primary and/or secondary schools (香港研究協會, 2017). The research made use of the four different parenting styles from Baumrind, Maccoby and Martin (1983) to form 21 questions in the questionnaires to ask 1079 parents to fill in, and found out that over 70% of the parents responded with 'strongly agree' or 'fairly agree' on Authoritative parenting style, indicating most of the parents in the research in Hong Kong were in favor in adopting Authoritative parenting style to their children in order to enhance their growth and development (香港研究協會, 2017).

Another local quantitative research conducted in the same year explored the correlation between children's self-esteem and their views towards their parents (生命及倫理研究中心, 2017). It was raised awareness that Hong Kong was influenced by traditional Chinese culture, and so the society was different from the Western world. Several research scales and questionnaires were used, including the Chinese versions of Rosenberg's Self-esteem Scale (RSES), Perceptions of Parents Scale (POPS), and Brief Family Environment Scale (BFES). The target group were students from Primary 4 to Secondary 5 and 3100 of the questionnaires were successfully collected and used for data analysis. The research's results found that when both of the parents made use of parenting styles similar to Authoritative parenting styles as defined above, such as chatting, accompanying their children regularly, giving compliments and assistance to their children if necessary, etc., they could greatly enhance their children's self-esteem; while unsupportive acts similar to Authoritarian parenting style as defined above, such as ignoring their children's thoughts and needs, giving disagreements to them most of the time would decrease their self-esteem. The research's result also showed that both father and mother showed love and care to their children (both primary and secondary school students)

was the first step of helping develop children's self-esteem (生命及倫理研究中心, 2017).

In 2014, a quantitative local research was done, with a total of 2007 teenagers aged 12-16 being interviewed to study the adolescents' growth and development as well as their family status in Hong Kong (香港明愛學校社會工作服務、香港理工大學應用科學系, 2014). It made use of measurements of hopelessness, life satisfaction, and positive development towards adolescents as the dependent variables and independent variables included care, parenting style, behavioral norms, psychological control and traditional Chinese culture. It measured the parents' influence on their children, and the independent variables were similar to Authoritarian and Authoritative parenting styles as defined above. The results showed some major results that more adolescents found that their fathers showed their care more often than mothers, while their mothers often used a stricter style to teach them. Also, the research found out that when parents cared for their children more, it would positively influence their psychological health, while using a stricter parenting style often would lead to the opposite effect. Chinese traditional values also positively affected their psychological health and life satisfaction levels (香港明愛學校社會工作服務、香港理工大學應用科學系, 2014). Thus, the research generally reported that parents adopting a more Authoritarian parenting style as defined above would lead to the decrease of their children's self-esteem while using a more Authoritative parenting style would increase their children's self-esteem.

When reviewing the local research findings above, they are all very comprehensive as well, especially the one from the Centre for Life and Ethics Studies (生命及倫理研究中心, 2017). They also made use of a quantitative approach in their studies. They made use of different methods to conduct their studies, such as random phone calls, surveys, and different types of measurements such as the Rosenberg's Self-esteem Scale (RSES) to conduct a valid and reliable result on parenting's effects on children's self-esteem. The first research showed that most of the parents in Hong Kong were in favor of adopting an Authoritative parenting style for their

children in order to enhance their growth and development. The second and third research confirmed that parents adopting acts similar to the Authoritative parenting style could positively enhance their children's self-esteem.

Limitations of the Previous Studies and research gap

Although the above findings are very comprehensive. However, there are still some limitations for application in this study.

Firstly, the research studies found in other countries only serve as a reference to this research. As mentioned above, these studies came from Malaysia and the United Arab Emirates. They did provide comprehensive, detailed, valid, and reliable results, and their research topics were related to the influence of parenting styles on their children's self-esteem. They are also appreciated in that they used valid and reliable tools for data collection and analysis. However, they were not conducted in Hong Kong, nor any of the Hong Kong citizens participated in their research. Moreover, there are cultural differences between their regions and Hong Kong, thus, they only serve as a reference on how authoritative parenting style affects children's self-esteem. The correlation between Hong Kong dual parents' parenting style and their children's self-esteem is still needed to be further investigated.

Secondly, the above local research findings were not specific and detailed enough to show how different parenting styles from Hong Kong parents affect their children's self-esteem. The Centre for Life and Ethics Studies were not specific enough to target adolescents as the main target group for research, and it also did not use Baumrind's parenting styles in their study (生命及倫理研究中心, 2017). The research from the Hong Kong Caritas did interview adolescents as their target group in the research, but it also did not define the four parenting styles and did not use Baumrind's parenting styles as well. Also, it only made use of hopelessness, life satisfaction, and positive development towards adolescents as the dependent variables rather

than self-esteem (香港明愛學校社會工作服務、香港理工大學應用科學系, 2014). For the Hong Kong Research Association's research, although it made use of Baumrind's parenting styles as the theoretical framework in their research, it only targeted the parents solely without including the adolescents, so discussion of the correlation of Authoritative parenting style and children's self-esteem was not shown in the result (香港研究協會, 2017).

Thirdly, not all the research reviewed studied both of the parents. For instance, the research from Alsheikh et al. (2010) only studied maternal influence towards adolescents' self-esteem, which cannot show the full picture of how the effects would be when both parents' parenting styles were studied.

Lastly, ethical issues and confidentiality were rarely discussed in both the local and overseas research mentioned above. Only the methodology of the Centre for Life and Ethics Studies' research paid a certain amount of attention to the ethics and confidentiality on the research methods and process, such as primary and secondary schools were voluntary to participate in their research (生命及倫理研究中心, 2017).

CHAPTER THREE – RESEARCH QUESTIONS AND METHODOLOGY

Research Questions that led to the Proposed Research

- a. Which parenting style is the mostly used among the Hong Kong dual parents when taking care of their children?
- b. Can the Authoritative parenting style in Hong Kong still make a positive impact on children's self-esteem aged 12-17?
- c. Are there differences between the parenting styles of father and mother?

Main Aim and Objectives

Main Aim:

To explore and to have a deeper and broader understanding and discussion on the influence of the different parenting styles adopted from Hong Kong dual parents on children's self-esteem.

Objectives:

1. To explore the adolescents' perception on their parent's parenting styles
2. To explore the adolescents' self-esteem
3. To explore if there is any relationship between parenting styles and children's self-esteem

4. To critically examine and analyze the results of the research and to provide recommendations to parenting styles in Hong Kong
5. To enrich the previous research's results on the influence of different parenting styles on their children's self-esteem in the Hong Kong society

Methodology

Quantitative Design and the Variables:

Quantitative approach is a standardized approach in data collection to search for the pattern of causal relationship and/or test the given theory. Yun et al. (2019) also stated that quantitative research stresses the importance of using statistical analysis of data collected from inventories to explain the phenomenon.

In this research, there are two inventories to test the dependent variables. The independent variable is the parenting styles adopted by the Hong Kong dual parents and will be measured by the Parental Authority Questionnaire (PAQ). The dependent variable is self-esteem among the 12-17 years old adolescents and will be measured by the Rosenberg Self-Esteem Scale (RSES). The inventories used in this study are identical to the research done by Yun et al. (2019).

Setting:

The research was conducted in Hong Kong and the students in Pentecostal Lam Hon Kwong School completed and submitted their questionnaires during lessons for around 15 to 20 minutes with guidance from their class teachers. Due to the influence of the COVID-19 pandemic, students were required to complete the questionnaires online rather than face to face.

Recruitment:

A good relationship was being built between the researcher and his graduated secondary school's principal, and further discussions with the principal was made from October to November, 2020. A formal letter was sent formally to the Principal to get permission from the School's Administration Board to conduct this research. After that, the researcher contacted and coordinated with the secondary school's principal to commence the research in the school for data collection in early 2021. The respondents were selected from the target population by 'stratified random sampling', which is regarded as the best and most scientific sampling method when conducting research, as everyone in the population has an equal opportunity to be selected. The principal made use of the School's e-Notice to inform the target students' parents about this research, and asked the class teachers to encourage the students to participate in this research by signing the online parental consent form during the 2 time slots respectively (Round 1: 23rd February to 28th February 2021; Round 2: 2nd March to 7th March 2021) (Please refer to Appendix 1).

Population and Sampling:

The population was Form 1 to Form 6 students who were studying in Pentecostal Lam Hon Kwong School, as most of their ages fell into the range of the research sample. The original target sample size was around 150 to 200 students to ensure the representation of the research. However, due to fewer students and parents being willing to sign in the consent forms, only 124 out of 349 of the students participated in this research.

The school has four classes in each form. As stratified random sampling was used, one of the four classes in each form were randomly selected in two different periods so that twelve different classes were chosen for this research. Four paper slips were marked 'A', 'B', 'C' and 'D', indicating the class names in each form. The researcher chose one of the paper slips randomly out of a box without seeing the paper slips, and repeated the same method to each form so that classes from Form 1 to Form 6 were selected

as the respondents (Round 1: 1A, 2A, 3C, 4C, 5C, 6B; Round 2: 1B, 2C, 3A, 4A, 5A, 6C).

Inclusion and Exclusion Criteria:

Students aged 12 to 17 years old with dual parents studying in Pentecostal Lam Hon Kwong School were the inclusion criteria, while students who did not belong to this age range, and did not have dual parents were excluded from this research.

Tools of Measurement (Please refer to Appendix 2):

- a. Rosenberg Self-Esteem Scale (RSES) (Rosenberg, 1965; Yeung, 1998; 生命及倫理研究中心, 2017; 梁、王, 2007) was used to measure the student's self-esteem, which uses a 4-point Likert Scale, ranging from Strongly Disagree '1 mark', Disagree '2 marks', Agree '3 marks' to Strongly Agree '4 marks'. It consists of a total of 10 items.
- b. Parental Authority Questionnaire (PAQ) was used to measure the parenting styles using the Baumrind's framework, with 5-point Likert Scale, ranging from Strongly Disagree '1 mark', Disagree '2 marks', Neither Disagree nor Agree '3 marks', Agree '4 marks' to Strongly Agree '5 marks'. It consists of a total of 30 items (Yun et al., 2019; 魏, 2002).

Reliability and Validity:

The reliability and validity of the Parental Authority Questionnaire (PAQ) were tested by Buri (1991), which supported the PAQ having the potential as a tool in the investigation of correlates of the Permissiveness, Authoritativeness, and Authoritarianism from both fathers and mothers. A group of students from an introductory psychology class (30 girls and 32 males) were involved to complete the PAQ at the end of the class and then 60 of them (28 girls and 32 males) were tested again after 2 weeks. Test-retest reliability was used by Buri (1991) and the results were: $r = .81$ for mother's Permissiveness, $r = .86$ for mother's Authoritarianism, $r = .78$ for

mother's Authoritativeness, $r = .77$ for father's Permissiveness, $r = .85$ for father's Authoritarianism, and $r = .92$ for father's Authoritativeness, which showed that the PAQ is a reliable tool. Internal consistency, content-related validity, criterion-related validity, and discriminant-related validity were tested for PAQ. Yun, et. al (2019) stated that Buri's test results on PAQ show that it is a valid tool to measure and identify parenting styles for parents. In a Taiwanese study (魏, 2002), the researcher also stated that Buri's test on the PAQ has high reliability and validity and translated it into the Chinese version.

The Rosenberg Self-Esteem Scale (RSES) is a popular tool to measure one's self-esteem and is now widely used around the world. The scale was studied and tested by two researchers from the University of Macau for its reliability and validity (梁、王, 2007). They invited 314 junior secondary students in Macau to fill in the scale and found out that the third, seventh and eighth items can be modified to increase their reliability, and the eighth item was relatively difficult to translate. However, the reliability still increased after translation and modification and it was still a valid tool to measure adolescents' self-esteem (from 0.626 to 0.757). Another researcher from the University of Hong Kong (Yeung, 1998) also made use of RSES to study the self-esteem of Form 2 and 3 students as well as Primary 5 and 6 students and stated that it is high in reliability and validity. In his research, he also used the translated Chinese scale. Heatherton (2003) also showed that RSES is high in reliability (alpha .92) in the 10 items of the inventory.

Data Collection:

Pilot tests were conducted for three rounds in a total of 7 students during early to mid-February 2021 to ensure the questions are relevant and appropriate enough. From the feedback in the pilot test, some of the Chinese words were rearranged and further consultation with the supervisor was made for approval. Also, ethical approval was sought from Gratia's Research Office during mid to late February 2021 to allow the distribution of the finalized questionnaires to the target respondents. Google form links and QR codes for the online questionnaires were designed to send to the

principal from 23rd February to 7th March 2021, so he could help distribute them in the chosen classes respectively in 2 different time slots (Round 1: 1st March to 7th March 2021; Round 2: 8th to 12th March 2021) for data collection. The researcher collected the response on the questionnaires immediately from 1st March to 12th March 2021 from Google Forms. Due to some of the target students still had not submitted their questionnaires on 12th March, a few days of extension was allowed in order to collect the remaining data until 15th March 2021.

Data Validation and Analysis:

Data preparation was done by the researcher from the collected data via the Google Sheet (Excel), and then followed the three steps of data preparation: data validation, data editing and data coding, to ensure that the data collected were correct, convenient for coding and suitable for analysis. The SPSS system was used for data coding and analysis. Respondents who were not in the age range were excluded in this stage resulting in 119 students in the sample.

Ethical Issues and Confidentiality:

The research followed the three aspects of research ethics: Keeping scientific standards, complying with the law, and avoiding social and personal harms. The researcher strived for honesty in all communications and honestly reported methods, procedures, data and results in this written report.

To comply with the law and avoid social and personal harm, when collecting the data from the respondents, each of them received a consent form for themselves and their parents and it stated clearly the purpose of data collection, use of data, and anonymous report of data under the Cap. 486 Personal Data (Privacy) Ordinance, 1996. The consent form for them also stated clearly that their participation in this research was voluntary, and the students had the freedom to refuse and the right to withdraw at any time during the research.

CHAPTER FOUR – FINDINGS AND ANALYSIS

The Alpha Reliability Coefficient was used to check the reliability of the PAQ and RSES respectively. The Alpha Reliability Coefficient of PAQ was .668 in Father Permissive, .663 in Mother Permissive; .811 in Father Authoritarian, .816 in Mother Authoritarian; .890 in Father Authoritative, and .885 in Mother Authoritative. For RSES, the Alpha Reliability Coefficient was .870. Previous studies showed that the Alpha Coefficient ranging from 0.65 to 0.8 or above is regarded as good in reliability (Goforth, 2015; Yun et al., 2019). Thus, the Alpha Reliability Coefficients of the inventories found in this research were “above average”.

Table 1: Percentage by Gender

	Gender	Frequency	Percent	Cumulative Percent
Valid	Male	46	38.7	38.7
	Female	73	61.3	100.0
	Total	119	100.0	

There were a total of 46 (38.7%) male students and 73 (61.3%) female students who participated in this study. (Table 1)

Table 2: Percentage by Form

	Form	Frequency	Percent	Cumulative Percent
Valid	Form 1	24	20.2	20.2
	Form 2	36	30.3	50.4
	Form 3	24	20.2	70.6
	Form 4	14	11.8	82.4
	Form 5	14	11.8	94.2
	Form 6	7	5.9	100.0
	Total	119	100.0	

There were a total of 84 lower form students (Form 1 to 3), while there were a total of 35 higher form students (Form 4 to 6). Form 2 had the highest response percentage (30.3%). The lower form (Form 1 to 3) students had a higher response percentage (70.6%) than the higher form (Form 4 to 6) students (29.3%). (Table 2)

Table 3: Percentage by Age

	Age	Frequency	Percent	Cumulative Percent
Valid	12	18	15.1	15.1
	13	30	25.2	40.3
	14	28	23.5	63.8
	15	16	13.5	77.3
	16	16	13.5	90.8
	17	11	9.2	100.0
	Total	119	100.0	

Most of the students were 13 (25.2%) years old, which probably corresponded to Form 2 students in Table 2. Students aged 12 to 14 years old were relatively more than those aged 15 to 17 years old, which were 76 (63.8%) and 43 (36.2%) respectively. (Table 3)

Table 4: Percentage by Students' Self-esteem Score

	Score	Frequency	Percent	Cumulative Percent
Valid	18-25	5	4.2	4.2
	16-20	12	10.1	14.3
	21-25	42	35.3	49.6
	26-30	37	31.1	80.7
	31-35	17	14.3	95.0
	36-38	6	5.0	100.0
	Total	119	100.0	

The highest self-esteem score from the RSES is 40, while the lowest score is 10. The median of RSES is 25. Students who had a score lower than 25 belonged to the lower self-esteem group, while those with scores higher than 25 belonged to the higher self-esteem group. 60 (50.4%) respondents belonged to the higher self-esteem group, while 59 (49.6%) of them belonged to the lower self-esteem group. It should also be noticed that most of the students fell in the range 21-25 (35.3%), with scores “slightly below average”. (Table 4)

Table 5: Percentage by Score of Different Parenting Styles from Dual Parents

Table 5a: Father's Permissive Parenting Style Score

	Score	Frequency	Percent	Cumulative Percent
Valid	18-25	9	7.6	7.6
	26-30	45	37.8	45.4
	31-35	44	37.0	82.4
	36-40	16	13.4	95.8
	41-45	5	4.2	100.0
	Total	119	100.0	

Table 5b: Mother's Permissive Parenting Style Score

	Score	Frequency	Percent	Cumulative Percent
Valid	16-20	3	2.5	2.5
	21-25	12	10.1	12.6
	26-30	44	37.0	49.6
	31-35	44	37.0	86.6
	36-40	11	9.2	95.8
	41-45	5	4.2	100.0
	Total	119	100.0	

Table 5c: Father's Authoritarian Parenting Style Score

	Score	Frequency	Percent	Cumulative Percent
Valid	11-15	3	2.5	2.5
	16-20	13	10.9	13.4
	21-25	37	31.1	44.5
	26-30	41	34.5	79.0
	31-35	17	14.3	93.3
	36-40	5	4.2	97.5
	41-45	3	2.5	100.0
	Total	119	100.0	

Table 5d: Mother's Authoritarian Parenting Style Score

	Score	Frequency	Percent	Cumulative Percent
Valid	14-20	16	13.4	13.4
	21-25	35	29.4	42.8
	26-30	40	33.6	76.4
	31-35	19	16.0	92.4
	36-39	5	4.2	96.6
	42-45	4	3.4	100.0
	Total	119	100.0	

Table 5e: Father’s Authoritative Parenting Style Score

	Score	Frequency	Percent	Cumulative Percent
Valid	14-20	3	2.5	2.5
	21-25	6	5.0	7.5
	26-30	23	19.3	26.8
	31-35	37	31.1	57.9
	36-40	33	27.8	85.7
	41-45	10	8.4	94.1
	46-50	7	5.9	100.0
	Total	119	100.0	

Table 5e: Mother’s Authoritative Parenting Style Score

	Score	Frequency	Percent	Cumulative Percent
Valid	15-20	3	2.5	2.5
	21-25	5	4.2	6.7
	26-30	25	21.0	27.7
	31-35	32	26.9	54.6
	36-40	32	26.9	81.5
	41-45	14	11.8	93.3
	46-50	8	6.7	100.0
	Total	119	100.0	

The highest score from the PAQ is 50, while the lowest score is 10. The median of PAQ is 30. Scores lower than 30 imply a lower extent of the father/mother using that particular parenting style, while scores higher than 30 imply a higher extent of the father/mother using that particular parenting style.

From Tables 5a-e above, slightly more fathers and mothers adopted a higher Permissive parenting style. For Father's Permissive, 65 (54.6%) of them scored higher than 30 while 54 (45.4%) of them scored lower than 30; for Mother's Permissive, 60 (50.4%) of them scored higher than 30 while 59 (49.6%) of them scored lower than 30. Most of the fathers and mothers had a lower Authoritarian parenting style score. For Father's Authoritarian, only 25 (21%) of them scored higher than 30 while 94 (79%) of them scored lower than 30; for Mother's Authoritarian, only 28 (23.6%) of them scored higher than 30 while 91 (76.4%) of them scored lower than 30. For Authoritative parenting style, more fathers and mothers had a relatively higher score respectively. For Father's Authoritative, 87 (73.2%) of them scored higher than 30 while only 32 (26.8%) of them scored lower than 30; for Mother's Authoritative, 86 (72.3%) of them scored higher than 30 while only 33 (27.7%) of them scored lower than 30. In sum, most of the respondents in this study, both fathers and mothers, tended to adopt Authoritative parenting style more.

Table 6: Students' Self-esteem Mean Score

	Mean	N
All Students	26.0420	119
Male	25.0137	46
Female	27.6739	73
Age (12)	29.0556	18
Age (13)	25.2000	30
Age (14)	25.5714	28
Age (15)	27.8750	16
Age (16)	23.1875	16
Age (17)	26.0909	11
Younger Age Group (12-14)	26.2500	76
Older Age group (15-17)	25.6744	43

From Table 6, apart from Age (16), all the means were higher than the median RSES score (25) as mentioned in Table 4. Females had a higher mean than males by 2.66. For individual ages, those aged 12 had the highest mean score, while students aged 16 had the lowest mean score. The Younger Age Group (12-14) had a higher mean than the Older Age Group by 0.58

Table 7a: Comparison of Students' Self-esteem Score by Gender**ANOVA**

		F	Sig.
Self-esteem and Gender	Between Groups	6.572	.012

Table 7b: Comparison of Students' Self-esteem Score by Age**ANOVA**

		F	Sig.
Self-esteem and Age (12-17)	Between Groups	2.508	.034

By using ANOVA to compare the self-esteem scores, the means of the two genders were significantly different ($F=6.572$, $\text{Sig.} =0.012$) and the means in each age group were also significantly different ($F =2.508$, $\text{Sig.} =0.034$). The F value in difference in self-esteem as a result of gender difference was greater than those due to age difference (12-17), showing that the differences in self-esteem as a result of gender was greater than age. ANOVA was also used to compare self-esteem score means between Students' Forms, and between the 2 Age Groups (12-14 years old) and (15-17 years old) respectively. However, there was no significant difference (.192 and .595).

Table 8: Mean Scores of Different Parenting Styles from Dual Parents

	Mean	N
Father's Permissive Style	31.5630	119
Mother's Permissive Style	30.7815	119
Father's Authoritarian Style	26.4985	119
Mother's Authoritarian Style	26.9580	119
Father's Authoritative Style	34.6387	119
Mother's Authoritative Style	34.5714	119

The means of the same parenting styles of the dual parents were relatively similar, indicating the similarity of the parenting styles adopted by the dual parents. The highest mean belonged to Authoritative parenting styles, followed by Permissive parenting styles. The lowest mean was the Authoritarian parenting styles, with both Father and Mother's Authoritarian means lower than 30. This shows that relatively more parents tended to use Authoritative parenting styles in parenting in this study.

**Table 9a-c: Comparison of Parenting Styles
of Father and Mother**

Table 9a: Permissive Style

ANOVA

		F	Sig.
Father's Permissive and Mother's Permissive	Between Groups	11.900	<0.01

Table 9b: Authoritarian Style

ANOVA

		F	Sig.
Father's Authoritarian and Mother's Authoritarian	Between Groups	9.561	<0.01

Table 9c: Authoritative Style

ANOVA

		F	Sig.
Father's Authoritative and Mother's Authoritative	Between Groups	8.352	<0.01

By using ANOVA for analysis, all the means in the three parenting styles between fathers and mothers were significantly different. The difference in Permissive style was the greatest between fathers and mothers ($F = 11.9$, Sig. < 0.01), with fathers tended to be more permissive. The difference in

Authoritative style was the smallest between fathers and mothers ($F = 8.352$, $\text{Sig.} < 0.01$), with fathers tended to be more authoritative than mothers.

Table 10: Correlation between Students' Self-esteem and Parenting Styles

		Self-esteem	Father's Permissive	Mother's Permissive	Father's Authoritarian	Mother's Authoritarian	Father's Authoritative	Mother's Authoritative
Self-esteem	Pearson's Correlation	1	.070	.189*	-.157	-.230*	.268**	.390**
	Sig. (2-tailed)		.450	.040	.088	.012	.003	<0.001

*. Correlation >0.05 **. Correlation >0.01

Table 10 shows that some parenting styles did correlate with the students' self-esteem. All three types of Mothers' parenting styles had significant correlations with students' self-esteem, while only one type of Father's parenting style was significantly correlated. Authoritative Parenting styles among fathers ($r = .268$, $\text{Sig.} = .003$) and mothers ($r = .390$, $\text{Sig.} < 0.001$) had a significantly stronger and positive correlation with students' self-esteem than the other two parenting styles, with mothers' Authoritative Parenting style having a stronger correlation with students' self-esteem than Father's.

Table 11a: Percentage by Students' Identification with Fathers' Parenting Styles

		Frequency	Percent	Cumulative Percent
Valid	Not Agree	8	6.7	6.7
	Agree	111	93.3	100.0
		119	100.0	

Table 11b: Percentage by Students' Identification with Mothers' Parenting Styles

		Frequency	Percent	Cumulative Percent
Valid	Not Agree	10	8.4	8.4
	Agree	109	91.6	100.0
		119	100.0	

Tables 11a and b show that most of the students agreed with their parents' parenting styles.

Table 12: Correlation between Students' Self-esteem and Identification with Parents' Parenting Styles

		Self-esteem	Identification with Father	Identification with Mother
Self-esteem	Pearson's Correlation	1	.193*	.261**
	Sig. (2-tailed)		.035	.004

*. Sig. <0.05 **. Sig. <0.01

Table 12 shows that students' identification with their parents' parenting styles did have positive correlations with their self-esteem. The higher extent of students agreeing on their fathers' and mothers' parenting styles, the higher self-esteem the students would have. The correlation between extent of agreement on Mothers' parenting styles ($r = .261$, Sig. = .004) was stronger than the extent of agreement on Fathers' parenting styles ($r = .193$, Sig. = .035).

Table 13a: Comparison of Students by Gender with Identification with Fathers' Parenting Styles

ANOVA (Father)

		F	Sig
Students' Gender and Identification with Fathers' Parenting Styles	Between Groups	.005	.945

Table 13b: Comparison of Students by Gender with Identification with Mothers' Parenting Styles

ANOVA (Mother)

		F	Sig
Students' Gender and Identification with Mothers' Parenting Styles	Between Groups	4.623	.034

By using ANOVA for analysis, Tables 13a and b show that only identification with mother's parenting styles had significant difference (F = 4.623, Sig. = .034) among the two genders, but not with fathers.

Table 14a: Comparison of Self-esteem by Identification with Fathers' Parenting Styles

ANOVA (Father)

		F	Sig.
Self-esteem and Identification with Father's Parenting Style	Between Groups	4.536	.035

Table 14b: Comparison of Self-esteem by Identification with Mothers' Parenting Styles

ANOVA (Mother)

		F	Sig.
Self-esteem and Identification with Mother's Parenting Style	Between Groups	8.599	.004

Tables 14a and b show that those students agreeing with fathers and mothers' parenting style had significantly higher self-esteem than those who did not agree, and the significant difference in self-esteem between those agree or not with mothers' parenting style was greater ($F = 8.599$, $\text{Sig.} = .004$) than those with fathers' parenting style ($F = 4.563$, $\text{Sig.} = .035$)

Table 15: Percentage of Students' Perception of Parents' Influence on their Self-esteem

		Frequency	Percent	Cumulative Percent
Valid	Father	44	37.0	37.0
	Mother	75	63.0	100.0
	Total	119	100.0	

It shows that more students subjectively thought that their mothers influenced their self-esteem more (63.0%) than fathers.

Table 16: Percentage by Student's Types of Dual Parents**Table 16a: The Father as I stated is my Biological Father**

		Frequency	Percent	Cumulative Percent
Valid	Yes	115	96.6	96.6
	No	4	3.4	100.0
Total		119	100.0	

Table 16b: The Mother as I stated is my Biological Mother

		Frequency	Percent	Cumulative Percent
Valid	Yes	116	97.5	97.5
	No	3	2.5	100.0
Total		119	100.0	

Tables 16a and b show that most of the students' dual parents were their biological fathers (115, 96.6%) and mothers (116, 97.5%).

CHAPTER FIVE – DISCUSSIONS AND RECOMMENDATIONS

Overview

The research findings in this study show that different parenting styles did have correlations with the students' self-esteem, which matches with the previous research findings, especially of those in Hong Kong. Among the three parenting styles, Authoritative parenting style from dual parents can bring out the most positive impact on their children's self-esteem during adolescence. Between Father and Mother, Mothers' parenting style had greater positive correlation with the students' self-esteem.

Self-esteem Scores Among Adolescents are Above Average

This study's data collection period was under the influence of the COVID-19. According to Table 6, the students' overall RSES mean score was 26.0420, which was higher than the median 25. The result in this study was higher than Yeung (1998), in which the mean score among adolescents was only 22.2. When comparing with Hong Kong university students' result (Hui, 2018), their overall RSES mean score was 27.6, which was higher than respondents (adolescents) in this study. In Erik Erikson's 8 Stages of Development, adolescents are facing Identity Vs Role Confusion. Their peers and teachers are influential figures helping them to overcome their developmental crisis (Erikson, 1958, 1963; McLeod, 2018). However, apart from them, dual parents remain one of the most significant others who greatly enhance children's self-esteem during adolescence (龍、陳譚, 2004). Moreover, in the early stage of an individual's development, parents are the

most significant figures to establish the self-esteem of their children, and then foster them to grow and develop a sense of trust. So, despite external factors, such as the influence of COVID-19 which negatively influenced the adolescents' study motivation and effectiveness (CUHK, 2020), their levels of self-esteem remained slightly above average in this study. This shows that dual parents have their significance in maintaining and enhancing their children's self-esteem in their adolescence.

Authoritative Parenting Style Offers Strong and Positive Relationship to Children's Self-Esteem

From Table 5, more dual parents adopted Authoritative parenting style than other styles, i.e., a total of 73.2% of fathers and 72.3% of mothers scored 30 or above in the Authoritative parenting style in PAQ. Table 8 also shows that the highest PAQ mean scores from dual parents belonged to Authoritative parenting styles (Father's Authoritative 34.6387, Mother's Authoritative 34.5714). From Table 10, Authoritative parenting style also showed the most significant positive correlation with the students' self-esteem. This echoes with the local research results from the Hong Kong Research Association, that most of the parents in Hong Kong were in favor to adopt Authoritative parenting style for their children in order to enhance their growth and development (香港研究協會, 2017). According to Duvall (1957)'s Family Life Cycle, families with adolescents are mostly facing the risks of their children's having crises in their identities, having rebellious behaviors which may trigger parent-child relationship problems. The parent's tasks are to adjust their expectations and learn to let go yet with guidance and support, flexibilities, limit setting, and negotiation with their children. Thus, Authoritative parenting style, which has similar elements such as having a supportive manner with enough room for negotiation with adolescents, is more suitable and matches with the family tasks faced when the children are undergoing their adolescence. When family members can express enough caring and support to the children, with the elements of social competence, problem-solving skills, autonomy, and a sense of purpose and future in the family, children are more likely to become

happier and more successful individuals (Peterson & Green, 2009).

Maternal influence

Furthermore, all the 3 types of parenting styles from the mother showed significant positive correlations with the student's self-esteem, while only Father's Authoritative style showed its significance with the students' self-esteem. From Bowlby's Attachment Theory, Bowlby suggested keeping the infant close to the mother to increase the child's chances of survival (Bowlby, 1958; Cherry, 2019). It shows the importance of the mother to cultivate children's self-esteem in the family. 63% of the students thought their mother influenced their self-esteem to a larger extent than father (Table 15). The result further shows that mother as the more influential figure in enhancing children's self-esteem and as the primary caregiver, which matches the findings from the Centre of Life and Ethnic Studies, her care and love is the strongest factors to predict and enhance both male and female child's self-esteem than father's (生命及倫理研究中心, 2017).

Identification with Parenting Styles and Adolescents' Self-esteem

Dual parents' parenting styles have great influences on their children's self-esteem in adolescence. Tables 11 to 12 show that most of the students agreed with their dual parents' parenting styles, and the students' self-esteem and their identification with their dual parents' parentings styles have significant correlations. Table 12 shows that the students' self-esteem was higher when they had a higher extent of identification with their parents' parenting styles, while the identification with the Mother's parenting styles had a higher significant correlation than with fathers. Table 14a and b show that those identified with or not with fathers or mothers' parenting style had significant differences in self-esteem, in that those identifying with fathers and mothers' parenting style had higher self-esteem, and the difference was greater for those who identified with mother than those not. The results showed that whether children identify with

parental style is important to self-esteem, and identification with mother parental style is even more important.

Differences Among Parenting Style Approaches between Malaysia and Hong Kong

Although the same inventories (RSES and PAQ) were used in both Yun et al. (2019) and this study to study the relationship between parenting styles and their influences on children's self-esteem in their adolescence, the findings greatly differ. According to Yun et al. (2019), their findings show that Authoritarian parenting styles could bring out a positive influence on children's self-esteem, while this research shows that Authoritative parenting style has a strong and positive relationship on children's self-esteem (Table 10). Among many factors, cultural differences also influence the relationship between parenting styles and self-esteem (Martínez & García, 2007). In Malaysia, this may be due to fact that the Traditional Chinese culture is more prominent, which a more Authoritarian parenting style approach is more popular when raising children there.

Limitations

Some of the parents/guardians did not allow their children to participate in this research, so only 124 out of 349 target students could participate in this research. For the students, Form 6 students had just finished the mock examination at school and were having marks checking during the data collection period, as well as busying in preparing the 2021 DSE examination. They were less motivated in participating in this research according to the school principal's observations and feedback, which led to a lot less data be collected from them. Hence, the response rate was not manageable. Also, deep discussion and further observations about how the target population's self-esteem was affected by their dual parents' parenting styles were not possible in this research.

In fact, this research only explored the adolescents' perceptions, but not their parents. It was only conducted in one Hong Kong secondary school, but not secondary schools in different bandings and regions of Hong Kong, and the sample size was relatively small.

Recommendations

According to Chan et al. (2012), there were existing social provisions for family education programs in Hong Kong, which targeted families with adolescents (24.9%). However, parent education programs for their teenage children are entirely voluntary in nature and they may not reach parents and families which are most in need of them due to various reasons. From the researcher's observations and knowledge, career planning is one of the most popular programs for secondary schools, but it is rare to have compulsory family education activities and programs to teach both adolescents and their parents how to deal with their family issues. Regarding their recommendations and after doing this research, Programs for Adolescents, Parents, and Families are suggested to be implemented in secondary schools with a clear set of aims and goals to enhance adolescents' self-esteem through effective parenting skills and styles. (Please refer to Appendix 3).

CHAPTER SIX – CONCLUSION

This research provides literature for future researchers to explore more about the relationships between different parenting styles and their influence on their children in the Hong Kong context, with more exploration related to cultural, social and political influences, and family dynamics. With the latest research classifying parenting styles into 5 styles (Authoritarian, Authoritative, Permissive, Neglectful, Over-Involved) (Petras Media House, 2021), there will be much room for further discussion and research. However, it is recommended that Hong Kong dual parents use the Authoritative Parenting style when raising their children, so that their children can feel warmth, support, and have suitable guidance and room for negotiation with them. It is still the most suitable and healthiest way of parenting in Hong Kong as the result of this study shown.

APPENDICES

Appendix 1: Online Consent Forms for Target Respondents and their Parents/Guardians (Round 1 and Round 2 Sample)

Round 1 Sample

For Parents/Guardians

For Target Respondents

宏恩基督教學院 社會工作學院 「香港父母的管教模式如何影響 12-17 歲的子女的自尊心研究調查」 參與研究同意書

家庭管教模式對青少年成長的影響是世界各地及香港一個頗受討論的題目。近年來，香港社會亦越趨留意不同家庭管教模式對其對青少年成長的影響，曾有香港研究顯示父母對子女流露更多愛與關懷，是提升子女自尊感的第一步。

本研究的負責學生 (劉顯耀 Lau Hin Yiu, Sunny) 是來自 宏恩基督教學院 之 社會工作學士學位課程 的學生，於本年畢業，同時也是 2017 年 五旬節林漢光中學 的畢業生。本研究是負責學生的畢業論文的研究項目，將於 2021 年 4 月 19 日完成並提交畢業論文報告。研究的負責學生希望可以在畢業前於母校作研究以作貢獻，亦能透過今次研究經歷作為學習。本研究已經 何樞熾校長 及校方管理層的批准，因此能在母校進行此研究。

本研究目的為更加深入探討、了解和討論現時香港父母對子女所採用的不同管教模式如何影響 12-17 歲子女的自尊心，並會選擇五旬節林漢光中學的中一至中六學生為受訪對象。鑑於受新冠病毒的影響和顧及受訪學生的安全，本研究會以匿名網上問卷 (Google Form) 於 2021 年 3 月 1 日 至 3 月 12 日作調查及收集問卷結果，並需要受訪學生填寫姓名在此「參與研究同意書」方能開始研究。

為了讓受訪學生有充裕時間考慮是否參與本研究，最遲提交「參與研究同意書」的日期為 2021 年 2 月 28 日。研究負責學生收到同意書後，會與校方協調以 Google Link/ QR Code 等方式派發問卷。

細閱上述背景後，本人備悉上述研究計劃的目的。本人亦知悉此研究負責人來自宏恩基督教學院之社會工作學士學位課程學生 (學生姓名: 劉顯耀)。

本人知悉所提供的資料將根據 香港法例第486章《個人資料(私隱)條例》加以保護。而此研究所得的資料可能被用作日後的研究及發表，但該研究及發表中亦不會包含能夠識別本人身份的細節。本人的私隱權利會得以保留，本人的個人資料不會被公開。

研究人員已向本人清楚解釋列在所附研究程序上的資料，本人明瞭當中涉及的利益及風險；本人自願參與研究項目，並同意參與提供個人意見。

本人知悉本人有權就程序的任何部分提出疑問，並有權隨時退出而不受任何懲處。

備註：

1. 受訪學生會在課堂時間抽大約 15 分鐘填寫問卷
2. 就有關上述研究細則，可聯絡宏恩基督教學院社會工作學院 (研究項目導師：何潔雲博士 Dr. Helen Ho)
電話：5804 4140 (內線：260)

* Required

Bachelor Thesis: The Pathway and a Selection of Student Reports

1. 參與學生姓名 (中文全名) *

2. 參與學生就讀級別 *

Mark only one oval.

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Google Forms

Appendix 2: Online Questionnaire with PAQ and RSES (Round 1 and Round 2 Sample)

Round 1 and 2 are Identical

「香港父母的管教模式如何影響 12-17 歲的 子女的自尊感研究調查」 研究調查問卷

謝謝你/妳參與本研究！本問卷目的為了解在子女的角度，父母的管教模式如何影響你們的自尊感。問卷是不記名的，而所收集的資料只作研究用途。填寫問卷時間約 15 分鐘。

請於 2021 年 3 月 12 日或之前填妥問卷並提交。

備註：

所有問題均為必答題，請不要遺漏了任何一題喔！

* Required

父
母
的
管
教
模
式

以下是一些有關父母教養子女時常見的態度或做法，請依照你 父親 和 母親 的情況，由「(1) 非常不同意、(2) 不同意、(3) 一般同意、(4) 同意、(5) 非常同意」五個選項中，選出你覺得最接近的一項。

請不要遺漏了任何一題。如果你從很小的時候，就不曾或很少和 父親/母親 在一起，以致於你無法作答，那麼請你就某一位與你生活在一起，而且對你影響很大的男性（例如：繼父、養父、祖父、舅舅等）和 女性（例如：繼母、養母、祖母、阿姨等）來作答。

1. 1. 在我成長過程中，我的父母覺得在一個正常的家庭裏，我應該和他們一樣，都可以去做自己喜歡做的事 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. 2. 即使我不同意父母的看法，他們仍舊覺得強迫我接受他們的看法是為我好 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. 3. 在我成長過程中，只要我的父母叫我去做任何的事，他們便希望我立刻去做，並不要問任何問題 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. 4. 在我成長過程中，一旦家裏有了新的作法或規定，我的父母會和我討論訂定的理由 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. 5. 在任何時候，當我覺得家的規矩或限制不合理時，我的父母總是導引我用言語來溝通 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. 6. 我的父母總是覺得：我所需要的是能夠有自主權去替自己作決定，並且做我想做的事 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. 7. 在我成長過程中，我的父母不允許我對他們所做的任何決定提出質疑 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. 8. 在我成長過程中，我的父母會規範我的行為和決定，但用的是說理及勸導的方式 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. 9. 我的父母總是覺得：父母應該用更多的強制的手段或方法，使我能表現出該有的行為 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. 10. 在我成長過程中，我的父母不會只因為某些規範是由他們所訂定的，就叫我遵守 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. 11. 在我成長過程中，我知道我的父母對我有所期望；但當我覺得它們是不合理的時候，我可以隨時和父母討論這些期望 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. 12. 我的父母覺得：聰明的父母應該早一點讓我知道大人才是一家之主 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. 13. 在我成長過程中，我的父母對我的行為，很少有特定的期望或給予指點 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. 14. 在我成長過程中，當我的父母作有關家庭的決定時，大部份照著我想要的去做 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. 15. 在我的成長過程中，我的父母一向給我方向與指導，但方式上多是理性與客觀的 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. 16. 在我的成長過程中，假如我與父母意見不一致時，他們會很不舒服 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. 17. 我的父母覺得：假如父母在子女的成長過程中，不要限制子女的活動、決定、及欲望，那麼社會上大部份的問題都可以解決了 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. 18. 在我成長過程中，我的父母讓我知道什麼是他們期望我表現的行為；同時，假如我沒有達到那些期望，他們會罰我 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. 19. 在我成長過程中，我的父母讓我自己去決定大部份的事，而不要依賴他們許多的指點 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. 20. 在我成長過程中，當父母作有關家庭的決定時，他們會把我的意見列入考慮，但是他們所作的決定不會只因為我想要如此 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. 21. 我的父母並不認為：在我成長過程中，他們有責任指點與導引我的行為 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. 22. 在我成長過程中，我的父母對我訂有明確的行為標準，但是他們願意因著我的個別需要而有所調整 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

23. 23. 在我成長過程中，我的父母指引我行為及活動的方向，並且希望我照著他們的指引去做；但是他們也總是願意聆聽我的想法，而且和我討論那些指引 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. 24. 在我成長過程中，我的父母允許我在家庭事務上，有我自己的看法，而且他們通常也讓我自己決定要做的事 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25. 25. 我的父母總是覺得：只要父母在子女沒有把該做的事做好時，能嚴格及強制的加以處理，那麼社會上大部分的問題都可以迎刃而解 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. 26. 在我成長過程中，我的父母經常明確的告訴我，他們要我做什麼，以及他們期望我如何做 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

27. 27. 在我成長過程中，我的父母對我的行為及活動，給予清楚的指示；但是當我不同意他們的看法時，他們也能理解 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. 28. 在我成長過程中，我的父母不對我的行為、活動、及欲望給予指示 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. 29. 在我成長過程中，我知道我的父母對我的期望，而且他們堅持我要照著他的期望去做，只因為我應該尊重他們的權威 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. 30. 在我成長過程中，假如我的父母所作的決定傷到我，他們會願意和我討論這個決定；同時，假如他們覺得做錯了，他們會承認錯誤 *

Mark only one oval per row.

	(1) 非常不同意	(2) 不同意	(3) 一般同意	(4) 同意	(5) 非常同意
父親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
母親	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31. 31. 在回答上面各題時，我所指的父親是我的生父 *

Mark only one oval.

是

否

32. 32. 在回答上面各題時，我所指的母親是我的生母 *

Mark only one oval.

是

否

33. 33. 總括而言，你是否同意你父親對你的管教模式？ *

Mark only one oval.

同意

不同意

34. 34. 總括而言，你是否同意你母親對你的管教模式？ *

Mark only one oval.

- 同意
 不同意

自
尊
感

以下是一些句子形容你對自己的感受，請不要遺漏了任何一題。如果句子非常不能夠形容你的感受，請填「(1) 非常不同意」。如果你不同意句子的形容便填「(2) 不同意」、同意便填「(3) 同意」、非常同意句子的形容請你填「(4) 非常同意」。

35. 1. 總括來說，我對自己感到滿意 *

Mark only one oval.

- 1 2 3 4
-
- 非常不同意 非常同意

36. 2. 有些時候，我會覺得自己一點好處都沒有 *

Mark only one oval.

- 1 2 3 4
-
- 非常不同意 非常同意

37. 3. 我感到自己是有一些優點 *

Mark only one oval.

- 1 2 3 4
-
- 非常不同意 非常同意

38. 4. 我能夠把事情做得和大多數人一樣好 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

39. 5. 我覺得自己沒有什麼值得自豪的地方 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

40. 6. 有時我真的感到自己沒有用 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

41. 7. 我感到自己是一個有價值的人，而我的價值起碼並不比別人低 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

42. 8. 我希望我能夠對自己有更多的尊重 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

43. 9. 總括來說，我傾向於感到自己像一個失敗者 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

44. 10. 我抱著積極的態度面對自己 *

Mark only one oval.

	1	2	3	4	
非常不同意	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	非常同意

45. 11. 總括而言，你認為誰 (父親 或 母親) 影響你的自尊感較大？ *

Mark only one oval.

- 父親
 母親

個人資料

46. 你所屬的年齡 *

Mark only one oval.

- 12 歲以下
- 12
- 13
- 14
- 15
- 16
- 17
- 17歲以上

47. 你所屬的年級 *

Mark only one oval.

- 中一
- 中二
- 中三
- 中四
- 中五
- 中六

48. 你的性別 *

Mark only one oval.

- 男
- 女

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Appendix 3: Suggested Compulsory School’s Programs for Adolescents, Parents, and Families

Suggested Programs/ Activities and Topics	Proposed Aims and Objectives
<p>Programs for Adolescents</p> <ul style="list-style-type: none"> ● Interests and activity-based programs (Sports/Music/drawing/making food/photo taking/gaming) ● Workshops and talks focusing on skill enhancement of interacting with their peers and parents ● Reflection of life and setting up life goals of themselves ● Stress and emotional management 	<ul style="list-style-type: none"> ● To enhance adolescents’ self-identities, self-esteem, autonomy and social network ● To teach adolescents to be responsible with their usage of words, stress and emotions ● To enhance adolescents’ abilities to interact with their peers and parents in different kinds of situations
<p>Programs for Parents</p> <ul style="list-style-type: none"> ● Re-Learning on communicating with their spouse and children in adolescence via different strategies (e.g. Non-Violent Communication, Emotional Focused Strategies) ● Stress relief and interest programs for parents (e.g. Mindfulness, Yoga, Sports, Music) 	<ul style="list-style-type: none"> ● To help parents to learn to communicate with their spouse and teenage children in their daily lives ● To help parents to learn how to relieve their stress in parenting and find new interests for enjoyment
<p>Programs for Families</p> <ul style="list-style-type: none"> ● Parent-child voluntary programs ● Parent-child communication learning programs ● Parent-child competitions 	<ul style="list-style-type: none"> ● To encourage families to interact and cooperate with each other ● To enhance relationships and teamwork between parents and their teenage children ● To remind the value and role of each family members

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Part Two:
Articles from Colleagues



Methodology in Qualitative Research

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1. Introduction

The Honours Project is one of the major required courses of the Bachelor of Social Work (Honours) [BSW (Hons)] in Gratia Christian College (GCC). All students must complete the Honours Project and obtain at least a pass to be eligible for graduation with a BSW (Hons) degree. Students need to conduct research independently from constructing their Honours Project topic to writing the report. Enhancing students' competency in conducting research is the response to the necessity in social work practices. Nowadays, in the social work field, many policy and funding decisions for service development are based on research outcomes resulting in the increasing requirement for social workers to be able to explore new interests, describe the characteristics of some populations or events, explain the discovery and reporting of relationships among different aspects of the phenomenon, and critically evaluate the effectiveness of the services under research study (Babbie, 2020). Research in social work is not only for understanding social reality, building theories, accumulating knowledge, but also informing social worker's practices and actions.

In the Honours Project, we demand different contents in different chapters. Although the contents in different chapters have specific purposes, they are all interlocked to contribute to the unity and coherence of the research report. In this article, I use one of my research studies about the human rights of persons with intellectual disability (ID) in Hong Kong as an example to explain the methodology in a research study using a qualitative approach. Although methodologies in social research can be

defined very broadly (e.g., qualitative, or quantitative) or more narrowly (e.g., grounded theory, or conversational analysis), they require the formulation of a visible plan and logical steps for searching the answers to the research questions. Thus, the design of the research, target informants and sampling, information collection and analysis, and research ethics are all included.

2. Relations of Qualitative and Quantitative Research

Before going to explain the methodology, I share some of my observations when I am teaching in the College. The first issue students need to manage is to determine what type of research approach they will adopt in their Honours Project. They need to decide either to adopt a qualitative or a quantitative approach in their study. Students choose to use qualitative approach because they may want to avoid or downplay statistical techniques and the mechanics of quantitative methods used in, say, social surveys. On the contrary, some of them prefer to use less time in data collection so that they adopt quantitative methods like questionnaires via google rather than utilize the more time-consuming methods like interviewing the informants individually or in groups. However, the choice between different research methods should depend on what we are trying to find out (Silverman, 2017). Take for an example, if we want to discover how people will vote in the Legislative Council, then a quantitative method, like a social survey, may seem to be the most appropriate choice. On the other hand, if we are concerned with exploring people's experiences and behaviors, then qualitative methods, such as interviews and focus groups are preferred.

A study may include both approaches in distinct phases of the research process (Flick, 2018) if necessary. The scholars, Miles et al. (2018) outline four types of design for integrating both research approaches in a single study. The use of these two research approaches are located at various stages of the research process. Let's say, using qualitative research

for developing hypotheses, which will afterwards be tested by quantitative methods. In GCC, some students have already used or might want to use both qualitative and quantitative approach in their study. However, the Honours Project supervisors might turn down this idea because using both qualitative and quantitative methodology in a single study is more complicated (compared to applying either qualitative or quantitative method only). It is more difficult for undergraduate students to manage when they are expected to finish the project in one semester. Therefore, it is not the issue of regarding one of the approaches to being inferior to the other or defining the other as the real research. The adoption of either one by the student is a practical concern.

Qualitative Research in the Human Services

Qualitative and quantitative methods have different strengths and logics, so the researchers use them to address different questions and purposes (Maxwell, 2012). The strength of qualitative research derives from its inductive approach, its targeted specific situations or people, and its unique word descriptions from findings rather than numbers. Therefore, qualitative research has become an increasingly important mode of inquiry for the social sciences and applied fields such as education, nursing, and social work (Marshall & Rossman, 2015). Instead of only seeking truth or reality that can be measured objectively, researchers begin seeking to be familiar with human knowledge and experiences. They commit to seeing the social world from the point of view of the informants, understanding the people how they see their own behaviors, and the context in which the behaviors take place rather than depend on logic of statistics in analysis. Social world cannot be understood in terms of simple causal relationships, or by the assumption of social events under universal laws (Hammersley, 1992). Rossman and Rallis (2003) further say that qualitative research is fundamentally interpretive, emergent, and evolving which use multiple methods that respect the humanity of participants in the study. Thus, qualitative research emphasizes discovering unanticipated findings and the possibility of altering plans in response to unexpected occurrences.

3. Research Methodology

Just describing the concepts and the requirements of methodology in the research may be monotonous and dogmatic. I will use my study as an example to explain how I managed the methodology in a research study I did before. The example will include epistemology, research approach, research design, methods of data collection, and data analysis. Furthermore, it also includes the issue of trustworthiness and the ethics of the study.

3.1. Epistemology, Methodology and Methods Adopted

With reference to the interrelationship between the epistemology, methodology, and methods adopted in my study, Table 1 below provides an overview for easy understanding.

Table 1: From Epistemology to Methods in the Study

Epistemology	Methodology	Methods	
		Information Collection	Information Analysis
Interpretivism	Qualitative Research	- Semi-structured in-depth interviews	- Preliminary Data Analysis - Thematic Analysis

3.1.1. Epistemology

“Epistemology concerns the nature of knowledge and knowledge production, including what the researcher counts as knowledge” (Carey,

2009, p. 68). Referring to the epistemology of interpretivism, a subjective personal understanding of people and their interpretation of the world around them is important (Carey, 2009; Scott, 1990). Regarding theoretical perspective, interpretivism attempts to uncover the meaning and interpretation of people's experiences in the social world. It seeks to explain behaviors from the individual's viewpoints. In my study, I unearthed the informants' beliefs and actions about their concern on human rights as well as these beliefs/actions' impact on the environment around them.

Following the suggestions made by the interpretivists that informants are allowed to take a leading role within the research process (Carey, 2009), I used the flexible and subjective approach in the study because it was the best ways to see the subject's world through the subject's own eyes (Rubin & Babbie, 2001). I applied the qualitative method to adopt a flexible stance and brought the informants' personal experiences as well as values to bear on the study (Bloomberg & Volpe, 2012).

3.1.2. Methodology: Qualitative research

My example was an exploratory and descriptive study using qualitative research method to seek for the understanding about human rights of adult with ID and the response of social workers, and parents of the ID on human rights issues. I attempted to understand the opinions, emotional responses and attitudes expressed and articulated from these various informants about the issues of human rights; then linked these to their behaviors and actions; and finally, contextualized the views and conducts of these different informants. I chose qualitative research method because the utilization of qualitative research method enabled me to gain deeper understanding about the informants' feeling and meanings about their experiences in tackling the human rights issues in their daily lives, or social workers' daily practice. In this exploratory research, qualitative research method was best suited to get answers for the research questions.

According to Sekaran (2003), "an exploratory study is undertaken when not much is known about the situation at hand, or no information

is available on how similar problems or research issues have been solved in the past” (pp.19-20). Since there were not many studies done before in exploring the reactions, and viewpoints about human rights from the perspectives of the persons with ID, the parents of persons with ID, and the social workers who were familiar with the ID informants, I tried to initiate such an exploration in the study. The adoption of qualitative research was justified.

3.1.3. Research design and methods of data collection

3.1.3.1. Informants

In my study, three groups of persons with ID were involved. The first group were the persons with ID living in residential institutions with not less than two years, and the second group of the ID informants were living with their family members. Choosing the institutional residents and those living with family members as the ID informants as two different groups because their living styles were quite different from each other. Furthermore, the ways they were treated by their parents in human rights issues at home would be different from the social workers managing their human rights issues in the institutions. Besides, persons with ID usually needed a longer time to adjust their lives in institutions. For those who were admitted for not less than two years had already gone through most operational procedures and they were familiar with the staff in the residential institutions.

Concerning the third group, they were informants with ID who participated in open employment including those working in social enterprises. It was reasonable to anticipate that persons with ID having more capacity would have more income, and would tend to request for more autonomy in various aspects of their lives. The information gathered from the ID persons working in open employment was expected to be different from the information gathered from the informants working in Sheltered Workshops (SW)/Integrated Vocational Rehabilitation Service Centers (IVRSC).

In my study, all ID informants were aged between twenty-two to forty-four with basic verbal communication and comprehension capability within the moderate grade or above of intelligence. The size of each ID informant groups were two. Totally six ID informants were recruited. Parent informants were those who took care of the ID informants. For social worker informants, all of them were Registered Social workers with social work diploma qualification or above. They were the responsible social workers of the ID informants in the service units and had experience in managing the ID service users' demands in personal freedom, making choice of their living, developing their plans, and/or complaints about the issues of violation of human rights.

The sample size of the ID service users was six. The sample size of the parent informants and social worker informants were both five. Total informants in the study were sixteen.

3.1.3.2. Sampling process

Purposive sampling strategy was used to choose appropriate informants based on the criteria as mentioned above. I had established some connections that facilitated me to identify potential informants who were willing to join the study. I approached self-advocacy groups and associations of parents of the persons with ID to introduce the study and requested them to introduce me in their meetings. I regularly joined their meetings so that I could identify some potential informants who had the experiences of encountering human rights issues when they were receiving services in various settings. Then I further explained the nature of the study and invited them to be the informants. The intensity sampling method was adopted which allowed me to select a small number of informants that could provide rich and in-depth information and knowledge of a phenomenon of interest of my study. As Patton (2002) asserts, an intensity sample consisted of information-rich cases that manifested the phenomenon of interest intensely without the weakness of lacking generalization.

The snowball sampling was also used in the study. After interviewing the ID and parent informants, I requested them to introduce

their social workers who were responsible for them in the service units to me. Furthermore, I contacted my social worker friends to ask them to introduce some potential social worker informants working in SWs/IVRSCs. Subsequently, I contacted those potential informants to confirm their suitability and invited them to participate as social worker informants in my study. Then, I asked them to suggest their ID service users and their parents who were suitable for joining the study. The chain of recommended informants was established through the process by asking the informants to refer some other informants who met the criteria of selection and had interests in joining my study. These informants provided the needed information so that I could collect a great deal about the concerns of human rights of various stakeholders.

3.1.3.3. Data collection

As it was an exploratory and descriptive study, the method of in-depth interview was used so that data would be collected through face - to - face interaction between the informants and the researcher. All interviews were arranged in advance. The interviews were semi-structured. The general interview guide approach (Patton, 2002) was utilized in designing the content of interview. Some “must-ask” questions were placed to ensure that certain domains were addressed uniformly with informants so that the qualitative interviews were not improvisatory (Padgett, 2016).

Although the questions in the interview guide were asked among each informant in a systematic and consistent order, I searched for things and meanings beyond the answers to my prepared questions in the interview guideline. I started from the set interview questions but allowed digressions when I found some responses from the informants were relevant to the research questions. Also, the informants in the study were encouraged to introduce any topics that they considered relevant and important to the research area.

The interview guide was developed around a list of topics without fixed wording or ordering of questions. The contents of the interview were focused on the issues that were central to the research questions,

but the type of questioning and discussion allowed for greater flexibility (Minichiello et al.,1997).

The length of the interview varied from 40 minutes to 90 minutes to ensure depth and completeness. The names of the informants and their serving organizations were not recorded in the audio tapes. The interviews were held at time convenient to the informants and venue available.

3.2. Information Analysis

The purpose of information analysis, as Patton (2002) says, is to make sense of massive amount of data, reduce the volume of information, identify significant patterns, and construct a framework for communicating the essence of what the data revealed. After collecting information from the above-mentioned method, I adopted preliminary data analysis and thematic analysis which are two widely used analytic tools to analyze the information in qualitative research (Grbich, 2012). Furthermore, the analysis encompassed data organization, theme development and interpretation, and report writing with the following seven phases of typical analytic procedures (Marshall & Rossman, 2015). These seven phases of information analysis are: (a) organizing the data; (b) immersion in the data; (c) generating categories and themes; (d) coding the data; (e) offering interpretations through analytic memos; (f) searching for alternative understandings; and (g) authoring the report. I followed these seven phases of analytic procedures to create explanation and discussion in the information.

3.2.1. Organizing the data

In this phase, I prepared a face sheet for each individual informant. Each face sheet had its own code number, the fictitious name assigned to the informant to maintain anonymity, the background of the informant, the date, time, and venue of the interview. The face sheet of an informant June is illustrated in Table 2 as an example.

Table 2: Face Sheet of ID Informant, June.

Code Number: C-01
Name of the Informant: June (Her mother insisted to accompany June in the interview process.)
Date of Interview: January 6, 2020
Venue of the interview: in the leisure place of her private housing estate...
Basic information of Informant: She is an adult with ID in moderate grade... June has not received stable vocational training.
Interviewing time: 4:30 p.m. - 5:30 p.m.

3.2.2. Immersion in the data

I transcribed the verbatim and managed the preliminary data analysis simultaneously by writing down all significant views, observations, and reflections. These were important procedures for organizing a mountain of narrative. June's verbatim transcription is illustrated in Table 3.

Table 3: June's Verbatim Transcription with Preliminary Data Analysis.

Verbatim transcription C-01	Exploring self-determination of leading daily activities	Preliminary data analysis
Researcher: June, would you tell me something about your interest in singing Chinese Opera?	C-01-68	
June's mother: Regular singing and practicing the skills of Chinese Opera is basic. We always have open performance in Chinese Opera.	C-01-69	<p><u>Ways of parents to manage the human right issues of their ID sons/daughters</u></p> <p>- June's mother answered the questions for June although she had promised not to participate in the interview. She helped June plan her daily activities. June showed dissatisfaction with her mother's arrangement for her. Apart from staying in the hostel, June was accompanied by her mother.</p>

3.2.3. Generating categories and themes, and coding the data

I used preliminary data analysis to examine the transcriptions. Initial open coding of the information was used for the informants' meaning. I made codes on the significant words and phrases from the transcripts using distinct color dots and underlines to highlight them. Furthermore, some abbreviations and numbers had specific meanings in the interview transcripts. For example, C-01-50 referred to the 50th paragraph of the interview transcript of the first ID informant. For more details, June's verbatim transcription is further used for explanation.

Table 4: Coding the Data of June's Verbatim Transcription

Verbatim transcription C-01		Primary data analysis
<p>June: <u><i>I will not choose</i></u> to be admitted to another service unit. <u><i>I will not do</i></u> it!</p> <p>#The reaction of the ID informant in coming across with the violation of human rights issues. She chose to withdraw from the service. #</p>	C-01-22	<p>Subjective experiences and feelings in handling human right issues</p> <ul style="list-style-type: none"> - Liberty and security of the person - After June encountered the issue of suspected sexual assault in the sheltered workshop, she was frightened, and felt helpless. She decided not to come back to this service unit again and showed strong resistance to receive the service of another SW. June had no more confidence in SW service.

<p>June: All service users in the SW knew what had happened. They saw the process, but <i><u>they dared not talk openly for me.</u></i></p> <p>#The opinions or feelings about the interventions provided by the service units in protecting the human rights of the ID service users. #</p>	<p>C-01-26</p>	<p><u>The unequal relationship/status among service users, family members and staff</u></p> <ul style="list-style-type: none"> - June felt very helpless and powerless when making complaint to an instructor. Other service users dared not talk openly for June and acted as witnesses for June's suspected sexual assault. June thought that the service users were worried to be blamed by the staff if they accused the instructor of sexual assault.
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I further consolidated five various categories from all transcripts and grouped the coded information one by one which was then organized into different categories. For details, refers to the Table 5 as shown below.

Table 5: Categorization (Information Grouping)

Category one	Category two	Category three
Best interest of human rights of the people with ID (i) Life skills training for the persons with ID as ways to implement human rights (ii) Equality before the law ...	Ways to manage the human right issues from the view of parents and persons with ID (i) Maintaining of silence and low profile (ii) Complaints ...	Subjective experiences and feelings in handling human right issues in service units (i) Service policies (ii) Living, training, and open employment ...
Category four	Category five	
Social worker's experiences in balancing the interests of different parties in human right issues (i) Neglect the interests of the service users. (ii) Tend to accept parents' decisions for their ID sons/daughters 	The unequal status among service user, family member, and staff (i) Avoid from making request (ii) Closely monitor the lives of their ID sons/daughters in service units. ...	

After generating the categories, I proceeded with thematic analysis. It was a process of information reduction for meaningful groupings (Grbich, 2012). There were a total of six sets of informants' information in my study. The significant and related statements of the categories were put

under the five research questions one after one. In the process, some new understandings emerged. In the meantime, I made comparison between the added information and the old one. Once the themes were identified, the transcripts were reviewed again to validate the thematic analysis and to ensure that all meaningful interview data had been analyzed. Then the categories were integrated into themes. Each research question had its own themes with combination of quotations from interviews mentioning the experience of the informants in human rights issues. For instance, one of the research questions in my study was: What were the reactions of social workers when the ID service user' human rights were violated? Four themes were identified in this research question. They were (i) favor the interests of the service units, (ii) abide by parents' final determination for their ID son/daughter, (iii) neglect the protection of human rights in employment, and (iv) implement human right orientation in service provision.

The themes and their related narratives with coding from various informants of each research question were shown in details in the Chapter of Findings. In sum, the phases from (a) to (d) served the important function of transferring the collected data into manageable portion for further interpretation.

3.2.4. Offering interpretations, and searching for alternative understandings

As themes and codings were developed, I offered integrative interpretation of the findings. As Patton (2002) notes: "Interpretation means...making sense of the findings, offering explanations, drawing conclusions..." (p.480). In the phases of (e) and (f) I discussed the findings of each research question in sequence. I searched for reasonable explanations for the findings in the themes and the linkages between these explanations in the Chapter of Discussion. The findings revealed that some social workers were not aware of their negligence in the human rights of their ID service users as well as their family members. Some of them defended the interests of their service organizations resulting in the loss of

protection of human rights of their service users. The working approaches adopted by the managerial staff and social workers in the service, and the impacts of current subvention mode on social service in practice could easily blur the desire or needs for them to ensure the human rights of their service users in service provision. Thus, I used the expert-based approach and medical model adopted by social workers in service implementation to explain the reasons why social workers failed to protect the human rights of their service users. Furthermore, I also analyzed how the Lump Sum Grant Subvention System affected the implementation of human rights in service provision.

3.2.5. Writing the report

The report was completed by several chapters including introduction, literature review, conceptual framework, research methodology, findings and analysis, discussions, and conclusion. The outlines of the chapters were included in the final document.

3.3. Efforts to Ensure Trustworthiness

Lincoln and Guba's concept of trustworthiness (1985) comes close to capture the phenomenon of rigor and accountability in qualitative research. They propose various criteria including credibility, dependability, and transferability for evaluating the trustworthiness of qualitative research. As listed below, some measures were taken to ensure the trustworthiness of my study, as there was no one way to ensure absolute trustworthiness in a qualitative study.

3.3.1. Credibility-triangulation

According to Bogdan and Biklen (2006), triangulation is a powerful technique that facilitates credibility of information through a process of cross verification from two or more sources. It signifies the

use and combination of several research methodologies or methods in the study of the same phenomenon. Janesick (2000) and Denzin (2009) further categorize triangulation into five types: (a) data triangulation, (b) investigator triangulation, (c) theory triangulation, (d) methodological triangulation, and (e) multiple disciplines to enhance the validity of the study or to overcome the bias or problem resulting from a single source. This involves the use of multiple researchers, multiple information sources, or multiple methods, to enhance the inter subjectivity of the study. In my study, investigator triangulation was adopted.

In respect of the application of investigator triangulation, the interpretations of information and thematization went through a process of tetra-checking. Firstly, I re-examined the interpretations of information by revisiting the verbatim transcription of each informant in a different period to see if there was any new discovery or discrepancy with the previous understanding.

Secondly, with the aim of minimizing the misunderstanding and bias of interpretation of information given by the informants, I sent the transcript of the interview to the respective informant. For the ID informants, I explained the transcripts to them. The procedures were to ensure accuracy as well as to provide an opportunity for informants to clarify, and to raise concerns or questions. Furthermore, I asked the informants to confirm or disconfirm the accuracy of the research observation and interpretation (Lincoln & Guba, 1985).

Thirdly, one social work professional, who had more than eight years' experience in the post of senior management in a social service organization for the disabled in Hong Kong, served as the peer reviewer in my study. I discussed the rationale, research design, data collection procedures, and data analysis methods with her regularly.

Lastly, the supervisor of the researcher, as a critical reader, enabled me to sharpen my views and develop insights through the entire process of the study.

3.3.2. Dependability- auditing

Transcripts of interviews written in the process of the study provided detailed explanation of how the data were collected and analyzed. I made the data collected in the study available for review by other researchers so that they can use it to verify the findings (Rubin & Babbie, 2001).

3.3.3. Transferability

The transferability refers to “how well the study has made it possible for readers to decide whether similar processes will be at work in their own settings by understanding in depth how they occur at the research site” (Bloomberg & Volpe, 2012, p.113). It is assessed by the richness of the description and the amount of detailed information of shared experience which can give the discussion of the shared experience (Bloomberg & Volpe, 2012). I had a thick description with more insightful interpretation which was a vehicle for communicating to the readers a holistic and realistic picture. Detailed and comprehensive descriptions was shown in the part of findings under various themes of five research questions. The description not only let the readers understand the experiences as well as opinions of the informants in the issue of human rights, but also laid a solid foundation for discussion.

3.4. Research Ethics

In ethical consideration, the well-being of the informants should be of prime concern. According to Rubin and Babbie (2001), “What we regard as morality and ethics in day-to-day life is a matter of agreement among members of a group. If we are going to do social work research, then you should be aware of the general agreements that are shared by researchers what is proper and improper in the conduct of scientific inquiry” (p.74). These two scholars further explain that the most important ethical agreements for social work researchers should include:

- (i) Voluntary participation and informed consent,
- (ii) Anonymity and confidentiality,
- (iii) No harm to the participants, and
- (iv) Proper information handling and reporting.

3.4.1. Voluntary participation and informed consent

Rubin and Babbie (2001) emphasize, “No one should be forced to participate. All participants must be aware that they are participating in a study, be informed of all the consequences of the study, and consent to participate in it” (p. 74). The capacity of informants to give freely their informed consent to research is a core principle in research ethics (Darlington & Scott, 2002). In my study, all informants took part on a voluntary basis. I contacted all potential informants to invite and explain the procedures as well as the objectives of the study. All mentioned procedures served to ensure all informants understand the nature of the study, the identity of the researcher, and their right to withdraw from the interview at any time or refuse to answer specific questions.

3.4.2. Anonymity and confidentiality

To protect the informants’ privacy and to keep confidentiality, I took measures to maintain anonymity by assigning a fictitious name for each informant. I either removed or modified sensitive personal information to ensure confidentiality. Moreover, I got the permission from each informant before recording the interview. Upon completion of the study, I deleted all these taped voice records and transcripts of the interviews.

3.4.3. No harm to the participants

Social work research should never injure the informants. The informants disclosed their past personal experience of suffering in pain.

I showed them with the greatest care and empathy so that they released their emotion safely. Thus, the contents of the study fully were related to the description of the informants and had gotten their understanding and consent.

3.4.4. Proper information handling and reporting

Honesty is essential in research. The discussion in my study was based on the facts collected by the informants which were shown systematically in the report for readers' understanding. The limitation of the study was also being illustrated in the report which helped the readers consider the application of the study.

4. Conclusion

I remember Professor Tsui Ming Sum, a retired Professor in the Hong Kong Polytechnic University, to use a journey in a forest as a metaphor to explain the amazing experience in collecting information, exploring the unexpected findings, and gaining progressively more knowledge of the situation in qualitative research. He said, "I took a walk in a forest. I collected leaves in distinct colors and tried to group them into categories. At the same time, I touched the trees and tasted the liquid from them. After the walk, I discovered that it was a forest of maple trees, what I tasted was maple syrup." I would like to further make use of this metaphor in the conclusion. The knowledge you gain from qualitative research at the beginning of your study is as small as a leaf, as you discover more, the knowledge becomes as diverse as trees, and by the end your knowledge gradually develops into a forest. Enjoy your journey. Nourish your growth with a delicious syrup from the forest.

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Social Work Research: A Quantitative Approach

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Introduction

In Hong Kong, the use of research study in social work practice has become more and more popular. Social work practitioners do a variety of research for examining social problems and assessing needs of service users, for improving social work practices, for advocacy purposes and for evaluating the effectiveness of social work intervention as a way of accountability measures.

This article aims at introducing the quantitative approach to social work students in doing social work research. It is not to present and update a comprehensive review of social work related research methods as stated in textbook. Rather, it is to raise some important issues in doing social work research project (“project” for short) using a quantitative approach for beginners.

What is Social Work Research?

The term “Social Work Research” is commonly seen in textbooks and literature as a research method for social work and/or research projects conducted by social workers.

Any study to create new knowledge or to add to the existing storehouse of knowledge, may it be through observation or by any other methods, is called research. Social work research is the application of research methods

to the production of knowledge that social workers need to solve problems they confront in the practice of social work (Thomas, 2010, p.11). It aims at providing information that can be taken into consideration by social workers to make decisions which are likely to affect their clients, or things which are involved in the use of alternative intervention techniques or modification of service objectives, etc.

From the theoretical point of view, social work research re-examines the special body or knowledge, concepts and theories; but from the utilitarian or practical viewpoint, it tries to evolve a systematized theory and valid concepts, so as to understand the efficacy of different methods/interventions of social work to find out innovative interventions or alternate treatments.

Therefore, it can be maintained that social work research is concerned with the problems encountered by social workers. The purpose of social work research may briefly be stated below:

1. To establish, identify and measure the need for services.
2. To measure the services rendered if they are related to needs.
3. To examine, measure and evaluate the consequences of social work interventions.
4. To assess the efficacy of specific techniques in offering services.
5. To study the methodological aspects of social work.

Steps in Research Process

Research process involves a series of steps progressing from the formulation of research problems through literature review, formulation of hypothesis, preparation of research design, determination of sampling method, collection of data, analysis and interpretation of data and testing of hypothesis to presentation of the conclusions. Such a series of actions,

concerning a lot of shifts from one kind of activity to the other, are required to be effectively carried out in the desired sequence at different points of specific operations, with the anticipation at each step the requirement of the subsequent steps in the process of research.

It is visualized that the research process travels a circular path because the findings of research studies may most often generate fresh ideas and problems which need further investigation. Furthermore, the major steps may overlap in time sequence and their activities may be functionally interrelated, involving both backward as well as forward linkages. No matter it is backward or forward, it implies substantial impact on the subsequent steps.

As mentioned, the major steps involving their corresponding activities may overlap continuously instead of adhering to a strict sequence, the researcher should always bear in mind that the different steps involved in the process of research are neither mutually exclusive nor separate and distinct.

Generally, the following is a useful procedural guideline of the major sequential steps of social work research:

1. Formulation of research problem/question.
2. Review of literature.
3. Formulation of hypotheses.
4. Working out the research design.
5. Defining the universe of study.
6. Determining sample design.
7. Administering the tools of data collection.
8. Analysis of data.
9. Testing of hypotheses.

10. Generalization and interpretation.
11. Reporting the research.

The Process of Research Problem Formulation

Research begins with a problem which needs solution/s. On the part of the researcher, first of all, it falls within the general area of interest for intellectual pursuit or for practical concern, such as finding solution to a problem, collecting evidence for the evaluation of a program, gathering relevant facts for social planning and policy making.

In selecting a problem for research, researchers are likely to be influenced by their own personal/professional values as well as the prevalent social environment. The choice of topics in social research vary widely. In any case, formulation of a research problem, no matter arising out of a theoretical inquiry or practical concern, is not an easy task.

In regard to social work students, they may generate the ideas on research question from the following sources:

1. Personal or fieldwork experiences
2. Literature review including theories, knowledge, development, etc.
3. Contemporary social issues
4. Own observations
5. Any other sources that stimulate their interest

In formulating the research question, students can consider the following factors:

1. The topic should be important (significant) to social work practice/policy.

2. The project should be feasible (in terms of time, collection of data and recruiting respondents, cost, competence of the researcher, etc.).
3. The researcher should have a personal interest in the topic.
4. The topic is ethical to study.
5. The research question is clear.
6. It is valuable to build up on previous research.

Literature Review

Literature review is an objective, thorough summary and critical analysis of the relevant research and non-research literature on the topic being studied (Hart, 1998). It aims to bring the readers updated and current knowledge on a topic and form the basis for another goal, such as the justification for future research in the area (Cronin et al., 2008).

The review of literature is a list of relevant books and other sources, each followed by a description and comment on its relevancy. It should demonstrate the researchers have read and analyzed the literature relevant to the topic. From the readings, researchers may get ideas about methods of data collection and analysis and will be required to relate the readings to the issues/research question in the project.

A literature review should only include relevant studies to provide the readers with a picture of the state of knowledge and what previous researches have been carried out in the subject.

Broadly speaking, there are three sources of literature review:

1. Journal articles
2. Books; and
3. Other written sources.

The literature review places the planned research in the context of related findings, helping readers to appreciate how the proposed study relates to what others have done. In writing the literature review, researchers should always refer to the original source, ensure full understanding, avoid errors due to misinterpretation or false transcription, and quote the original source in the text using the correct form of citation. The literature review section could contain examination of recent (or historically significant) research studies, company data, or industry reports that act as a basis for the proposed study. If the research question has a historical background, the literature review should begin with the earliest references.

Researchers have to provide a brief review of the literature, point out the essence but not indulge in extraneous details of the literature. Researchers should discuss the reviewed literature from a comprehensive perspective, like emphasizing the important results and conclusions of studies reviewed; discussing the relevant data and trends from previous research; how the literature applies to the proposed study; how particular research methods or designs could be duplicated or should be avoided; and how the weaknesses, faults or bias in the research design could be avoided. This analysis may go beyond scrutinizing the availability or conclusions of past studies and their data, to examining the accuracy of secondary sources, the credibility of these sources, and the appropriateness of earlier studies.

Hypothesis and Formulation of Hypothesis

By means of elimination, the researchers narrow the focus of study by indicating what will not be studied, that is, what will be excluded. In order to make the research problem explicit, it is essential to start with certain known theories. Research depends upon a continuous interplay of theory

and facts, that is, a continuous stimulation of facts by theory and theory by facts. Theory is built up by facts in a framework which may be analyzed and interpreted in a logical and theoretical manner, giving meanings to observed facts, and new facts discovered may lead to the rejection, reformulation or clarification of existing theory.

In the process, certain deductions are formulated which are called hypotheses. A hypothesis is a conjectural statement, a tentative proposition about relation between two or more phenomena or variables (Kerlinger, 1956). It is a tentative generalization and its validity remains to be tested. At its initial stage, a hypothesis may be an imagined idea or a hunch or a mere guess, or mostly based on accumulated knowledge. It is in the form of a declarative sentence and always indicates the relation of one or more variable(s) with other variable(s) in a general or specific way, which is made to examine the explanation of a phenomenon through investigation, and to observe facts based on the collected data. After investigation, if the hypothesis is found to be valid, a theory is obtained or the explanation of a phenomenon is confirmed.

There are two criteria for formulation of a good hypothesis. First, it is a statement about the relations between variables. Secondly it carries clear implications for testing the stated relations. Thus, these two criteria imply that the hypotheses comprise two or more variables which are or potentially measurable and that these hypotheses specify the way how the variables are related.

The following examples demonstrate how the two criteria are applied:

1. More intelligent persons will be less hostile than those of lower level of intelligence.
2. Group study contributes to higher grade achievement.

In the first hypothesis, a relation between one variable, “intelligence”, and another variable “hostility” is stated. Furthermore, measurement of

these two variables is also easy. In the second example, a relation has also been stated between the variables “group study” and “grade achievement.” Measurement of the variables is possible and the hypotheses can be tested.

Besides the two criteria, the attributes of a valid or usable hypothesis are:

1. It should be capable of empirical verification, so that it can be ultimately confirmed or refuted.
2. It must be conceptually clear, definite and certain.
3. It must spell out specific predictions.
4. The possibility of testing the hypothesis can be ethically approved.
5. It should be related to a body of theory and possess theoretical relevancy.

In sum, the hypothesis, in order to be workable, should be capable of being tested and measured by existing methods and techniques scientifically. According to Goode and Hatt (1952), if techniques are not available to test the hypotheses, it is difficult to formulate a usable research question. On the contrary, if a new or original theory is in the process of evolution, it would make the work of the investigator easier for propounding a new theory. In this regard, Goode and Hatt (1952) have stated that research frontiers are continuously challenged by the assertion that various problems ought to be investigated even though the investigations are presently impossible.

From Research Question to Research Design

Once the research question is formulated, a specific topic is chosen and the hypothesis is formulated, the next stage is to work out a research design. Preparing research design is an important stage in the process of conducting a research. Kerlinger (1986) defines a research design as “the plan, the structure and strategy of investigation purporting to answer research questions and control variance.” The term “plan” implies the

overall scheme or programme of the research embracing an outline of what the researcher intends to do, ranging from the stage of formulation of hypotheses and their working implications to the final stage of data analysis. The term “structure” intends to define the research study in a more specific way as the outline. The term “strategy” is used in a more specific way than “plan” and involves the methods and techniques - for collection of data and their analyses so as to achieve the precise research objectives. Miller (1964) defines “designed research” as “the planned sequence of the entire process involved in conducting a research study”. According to Young (1939), research design is the logical and systematic planning and directing of a piece of research.

According to Jahoda et al. (1951), a research design is the arrangement of conditions for collection and analysis of data that aims to achieve research purpose with economy in procedure. Thus, it becomes very clear from the above definitions that research design is nothing but a scheme of work to be undertaken by a researcher at various stages, facilitating the research work in a systematic manner and conducting the various operations methodologically.

Research design acts as a step by step guide to achieve the research goal in a calculative and cautious manner within a prescribed time limit and specified cost. If the study is not completed within the time limit, it will not only increase the cost but also induces a series of other problems associated with the research, resulting in poor quality. Therefore, the challenge of a research design is to translate the general scientific model into a practical research operation. Research design is the entire process of planning and implementation of a research study (Jahoda et al., 1951). It involves the arrangement of conditions and observations in such a way that alternative answers to the questions in the research are ruled out, and contains a built-in system of checks against all the factors that might affect the validity of the research outcome.

According to Young (1939), a research design should be able to provide answers to the following queries:

1. What is the purpose of the study? What is its scope?
2. What should be the specific nature of study?
3. What is the study about and what type of data are required?
4. What would be the methodology of study?
5. What are the sources of the needed data?
6. Where should be the place or area of study?
7. What type of sampling should be used?
8. What method of data collection would be appropriate?
9. How will the data be analyzed?
10. What time, approximately, is required for the study?
11. What should be the amount of material or number of cases for the study?
12. What should be the approximate expenditure?

From what has been stated above, two basic purposes of research design are derived: (a) to provide answers to the research questions, (b) to control variance.

A good quantitative research design should always fulfill the following four conditions: objectivity, reliability, validity and generalizability of the findings.

(a) **Objectivity:** The findings are said to be objective when they pertain to the method of data collection and the scoring of the responses. If the data collection method is by means of observation, the objectivity in respect of the procedure may be judged by the degree of agreement between the

final scores assigned to various targets of observation by more than one independent observer. The more the agreement among the observers, the more objective are the observation, recording and evaluation of the responses. Therefore, a good research design should have objective measuring instruments so as to decrease the variation between the observers.

(b) **Reliability:** Reliability means any claim that is substantiated as trustworthy for a given purpose, or make it simple, any measurement that brings the same result on repeated tests to the same respondent/s or event/s is reliable. A measuring instrument is said to be reliable if it is capable of providing consistent results. The reliability of a measuring instrument can be defined as the extent to which it measures consistently what it seeks to measure. For example, a thermometer is claimed to be reliable when it brings the same result on repeated tests on the same person within a short period of time.

(c) **Validity:** In general, validity means self-consistency or absence of self-contradiction and it implies how accurate a method/test can measure what it is intended to measure. For example, a thermometer is valid to measure body temperature, but is not valid to measure body weight. In details, there are several types of validity. One of them is construct validity, which is the degree to which the method/test can accurately measure a theoretical concept, like self-esteem. A scale can be said to have construct validity if it can accurately measure self-esteem as theorists defined. A test can be claimed to have high content validity if it can comprehensively measure different aspects of a concept.

As the most critical criterion of measurement, validity implies that the measure should be free from consistent or systematic error so that it is able to measure what it purports to measure. Selltiz et al. (1976) have defined the validity of an instrument as the extent to which differences in scores on it reflect true differences among individuals on the characteristics which the researcher intends to measure rather than constant or random errors.

(d) **Generalizability:** The degree of generalizability is known as the extent to which the result of a measurement/test can be applied/generalized to other contexts, or a broader group of people.

The Choice of Quantitative Research

A researcher must have a clear understanding of the various types of research design so as to select an appropriate method for a study. The design of study can be broadly classified into quantitative and qualitative. Obviously, the choice of methodological approach should be based on the nature of the research questions. In doing social work research, researchers could choose the following three approaches, namely: quantitative approach, qualitative approach and the mixed approach.

It is recommended that students could choose either the quantitative or qualitative approach. The use of mixed approach seems to be too complicated for beginners. The choice of research approach might be based on the nature of the approaches as summarized in Table 1 as below:

Table 1: Comparison of Quantitative and Qualitative Research

	Quantitative Research	Qualitative Research
Definition	Quantitative research is an inquiry approach useful for describing trends and explaining the relationship among variables. The investigator specifies narrow questions, locates or develops instruments using statistics. From the results of these analyzes, the researcher interprets the data using prior predictions and research studies. The final report, presented in standard format, displays researcher objectivity and lack of bias.	Qualitative research is an inquiry approach useful for exploring and understanding a central phenomenon. The inquirer asks participants broad, general questions, collects their detailed views in the form of words or images, and analyzes the information for description and themes. Drawing on personal reflections and past research, the researcher interprets the meaning of the information. The structure of the final report is flexible, and it displays the researcher's subjectivity and thoughts.
Design	<ul style="list-style-type: none"> • Emphasizes numbers, measurements, control, and experimentation 	<ul style="list-style-type: none"> • Emphasizes natural settings, observations, verbal narratives, and interpretations
Features	<ul style="list-style-type: none"> • Structured • Pre-determined • Formal • Specific 	<ul style="list-style-type: none"> • Evolving • Flexible • General
Sampling	<ul style="list-style-type: none"> • Large • Representative • Random Selection • Control Groups 	<ul style="list-style-type: none"> • Small • Non-representative • Purposeful

Nature of Data	<ul style="list-style-type: none"> • Quantities • Counts • Measures • Instruments • Numbers • Statistics 	<ul style="list-style-type: none"> • Verbal descriptions • Field Notes • Observations • Documents • Photographs • Narrative
Data Collection Method	<ul style="list-style-type: none"> • Experiments • Quasi-experiments • Questionnaires • Structured Interviews • Structured Observations 	<ul style="list-style-type: none"> • Open-ended interviews • Focus groups • Observations (by external or by participation) • Review of documents and written materials
Advantages	<ul style="list-style-type: none"> • Formulating hypotheses allows for speculation about outcomes; applicable instruments. • Predicts correlation between objects. • Systematic data collection and analysis. • Generalizable to other institutions for further research. • Recognized criteria for assessment and validity. 	<ul style="list-style-type: none"> • Helps explain relationships/issues in depth, details and is individualistic. • Help closing gap between research and practice: needs of individuals in institutions; study problems more relevant to policy makers. • Help validate quantitative findings by further investigation. • Less dependent on instrument.

Disadvantages	<ul style="list-style-type: none"> • Should only be used if data can be measured by numbers, and results be quantified. • Instrument or method chosen may be subjective. • All respondents are measured in the same way ignoring individual uniqueness. • Respondents' decisions/answers are evaluated ignoring their unique culture, situation, context, or their underlying thoughts/motives, or their understanding/interpretation of the measuring instrument. 	<ul style="list-style-type: none"> • Strong dependency on sample population: access, honest and valid information • Time and resources needed for collection and analysis is intensive • Lack of objectivity coming from bias and inferences of researcher. • Use of convenience or non-probability sampling leads to low degree of generalization
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In considering the pros and cons of the two approaches and the nature of research question(s), the researchers could make the decision in using either quantitative or qualitative approaches.

Concepts and Operationalization of Concepts

Concepts are the building blocks of theory while fact is a logical construct of concepts. A concept is abstracted from perceptions and should not be confused with the phenomenon itself. Since ordinary language fails to adequately convey the implications of scientific terms, science evolves its own language which are manipulated along with symbols with a view to contribute immensely to the established body of systematic knowledge. The scientist develops relevant concepts from moving gradually from concrete

data to higher levels of abstraction to become concepts. Thus concepts are mental images and people assign terms to name these images for effective communication.

Conceptualization is the process through which we specify what we mean, i.e. an agreed-on meaning, when we use particular terms in research. We cannot meaningfully answer a question without a working agreement about the meaning of a particular concept. As regards to operationalization of concept, the researcher is concerned with spelling out exactly and precisely how the concept will be measured. He/She will have to describe the operations that will be undertaken in measuring the concept. The process of developing operational definition is not necessarily linear, or step by step in an ordered manner. When attempting to operationalize the concept, the researcher may have to modify his conceptual definition, or when attempting to select a data collection method, his operationalization may be affected. Conceptualization is a circular process.

Operational definition of a concept describes precise, specific indicators or variables and their attributes that will be used to measure the concepts. For example, if the concept is “prejudice”, the operational definition might be a list of questions found to effectively reflect a person’s level of prejudice.

Sampling Issues

In doing research, the researcher has to select a number of respondents (samples) from the target population and conduct the research.

Population refers to the total number of cases with a given characteristic or characteristics, or all the members of a given set or class. Broadly speaking, “universe” or “population” constitutes all the individuals, things, events, documents, or observations either on a single or many individuals, etc. belonging to a designated category with specific attributes that a particular study should principally cover.

Sampling is the process of obtaining information regarding the entire research population or aggregate or totality by examining only a part of it. It is a picture in miniature to represent the larger whole, to enable the researcher to make a judgment or inference about the whole with the presumption that the sample data will provide valid and reliable conclusions. It is also the process and procedures to select the samples for doing research.

It is important for researchers to determine the sample size (number of respondents) of the research project. Various factors have to be considered, including: (1) the nature of the research; (2) the number of variables; (3) the nature of the analysis (use of statistical tests); (4) sample sizes used in similar studies; (5) incidence rate (the rate at which a new event occurs over a specified period of time) (6) completion rates; and (7) resource constraints ... etc.

Basically, the respondents of a research will be taken from either probability sampling or non-probability sampling. **Probability sampling** provides a scientific technique of drawing samples from a population in accordance with the principle of randomization, that is, random selection or chance in which each unit in the population has some definite pre-assigned probability of being selected in the sample.

Whereas, **non-probability sampling** is defined as a sampling technique in which the researcher selects samples based on the subjective judgment of the researcher rather than random selection. It is a less stringent method. This sampling method depends heavily on the expertise of the researchers.

In quantitative research, probability sampling will be commonly used. A survey on the sampling techniques are listed in Table 2.

Table 2: Comparison of Probability and Non-probability Sampling Methods

Sampling Method	Characteristics	Strengths	Weaknesses
<i>Non-probability Sampling</i>			
Convenience Sampling	Based on ease of accessibility	Least expensive; least time consuming; most convenient	Selection bias; sample not representative
Judgmental Sampling	Deliberately select a sample according to some criteria	Low-cost; convenient; not time consuming; ideal for exploratory research design	Does not allow generalization; subjective
Quota Sampling	Relevant characteristics are used to segregate the samples to improve representativeness	Sample can be controlled for certain characteristics	Selection bias; no assurance of representation
Snowball Sampling	Referred by current samples	Cost effective	Representativeness of the sample is not guaranteed
<i>Probability Sampling</i>			
Simple Random Sampling	All subsets of a sampling frame have an equal probability of being selected	Easily understood; results can be generalized	Difficult to construct sampling frame; expensive

Systematic Sampling	Arrange the study population according to some ordering schemes and then select elements at regular intervals with that ordered list	Can increase representativeness; easier to implement than simple random sampling; sampling frame not always necessary	Can decrease representativeness
Stratified Sampling	When the population has a number of distinct categories, the frame can be organized by these categories into separate "strata." Each stratum is then sampled as an independent sub-population, out of which individual elements can be randomly selected.	Includes all important sub-populations; precise.	Difficult to select relevant stratification variables; not feasible to stratify on too many variables; expensive

Data Collection Method

There are many quantitative data collection methods as found in the field of social work research. Two commonly used methods are survey method and experiment, which will be discussed in this article.

Survey Method

According to Young (1939), social surveys are concerned with (i) the formulation of constructive programmes of reform; and (ii) amelioration of current or immediate conditions of a social pathological nature which have definite geographical and social implications, and significance, (iii) these conditions can be measured and compared with situations which can be accepted as model. Burgess (1916) considers social survey as “the scientific study of community conditions and needs for the purpose of presenting a constructive programme of social advance... a method of social introspection checked by statistical measurement and the comparative standards of the social expert”. According to Harrison (1912), “Social survey is a cooperative undertaking which applies scientific method to the study and treatment of current related social problems and conditions having definite geographical limits and bearings plus a spreading of its facts, conclusions and recommendations which will make them as far as possible the common knowledge of the community and a force for intelligent coordinated action”.

Young (1939) has clearly delimited the area of survey to a definite geographical locality. She has also held that social surveys deal with some definite social problems and conditions. Similarly, Burgess’s definition lays stress on the constructive and progressive purpose of social survey. It is a well-known fact that the purposes of all social surveys is social progress and betterment of a community. Briefly speaking, all the foregoing definitions consider social survey as the investigation of social problems, conditions, structures, processes etc., so as to bring about change in the positive direction on the basis of collected facts.

The basic objective of social survey is the collection of facts regarding certain social aspects of a community so as to find out the causative factors responsible for community problems. In the survey method, data is usually collected using questionnaires. Survey is different from an experiment in that it does not involve a treatment given to the respondents in the research process.

The researcher has to develop his/her own measurement tool to collect data in the survey research process. In constructing the measure tools, question items could be done by: (1) self-design by the researcher; (2) use of existing validated inventory/scale/measurement tool, e.g. self-esteem, DSM-V. A scale may have more than one dimension/construct, for example, in the DASS21, there are three dimensions/constructs: depression, anxiety, and stress. If there are open-ended questions, and the answers are words, not numbers, group similar words into one group, and then assign numbers for data analysis purposes.

In the case of a questionnaire, usually nobody is there to aid the respondent to interpret a question or to clarify the meaning of some important terms in the questionnaire. In other words, the items and wordings in the questionnaire has to be clear, specific and self-explanatory.

Thus, the research should consider the following in designing the questionnaire:

1. Purpose of the study.
2. Importance of the problem under study.
3. Type of information required.
4. Secure advice from people who possess the related experience.
5. Thorough knowledge about the hypothesis.
6. Precision of the hypothesis.
7. Proper scrutiny.
8. Numerous revisions or pilot-testing.
9. Willingness of the respondents.
10. Length of the questionnaire.
11. Types of questions.

12. Appearance or a general layout of the questionnaire.
13. Language/wording of the questions.
14. Sequence of the questions.

In addition, in designing questionnaire for survey, the researcher should also avoid:

1. Central tendency: thus, the choice option in answering the question should be in even number.
2. Halo effect: to avoid this effect: (1) separate similar questions; and (2) ask some of the questions in opposite directions.

Overall speaking, the pros and cons of using survey method could be summarized in Table 3.

Table 3: Pros and Cons of Using Survey Method

Pros	Cons
<ul style="list-style-type: none">• Economical• Wide coverage• Rapid• Suitable in special type of response	<ul style="list-style-type: none">• Limited response• Lack of personal contact• Low response rate• Not reliable• Incomplete entries• Have possibility of manipulated entries

Experiment Method

Experimental research is a study that strictly adheres to a scientific research design. It includes a hypothesis, a variable that can be manipulated by the researcher, and variables that can be measured, calculated and compared. Most importantly, experimental research is completed in a controlled environment. The researcher collects data and results will either support or reject the hypothesis. This method of research is referred to a hypothesis testing or a deductive research method (Babbie, 1998).

Experimental research is common in natural science rather than in social science. It involves: (1) taking action (treatment/intervention, the cause, independent variable); and (2) observing the consequence/s (dependent variable/s) of that action (treatment). In a classical experimental design, the respondents are randomly assigned to two groups: (1) experimental group; and (2) control group. These two groups are only different in one variable (independent variable), while all other variables (characteristics) are the same. For example, giving treatment or intervention (independent variable) in the experimental group, while no treatment or intervention in the control group. After a specific time period, the two groups are compared in terms of the “assumed effect” (the **dependent variable**), enabling the researcher to draw causal inferences.

The three components of experimental design are: comparison, manipulation, and control. Through comparison, the differences between variables are known. Through manipulation, the researcher establishes the time order of events. The major evidence which becomes essential to determine the sequence of events is that - a change occurs only after the activation of the independent variable. In other words, the independent variable precedes the dependent variable.

There are three primary types of experimental design which are illustrated in Table 4:

Table 4: Different Types of Experimental Design

Experimental Design	Definition and features	Types
1. Pre-experimental research design	<p>A group, or various groups, are under observation after implementing factors of cause and effect.</p> <p>It is the simplest form of experimental research design.</p> <p>It has no control group.</p>	<ul style="list-style-type: none"> • One-shot Case Study Research Design • One-group Pretest-posttest Research Design • Static-group Comparison
2. True experimental research design	<p>Only true design can establish a cause-effect relationship within a group.</p> <p>In a true experiment, three factors need to be satisfied:</p> <ol style="list-style-type: none"> 1. There is a Control Group, which won't be subject to changes, and an Experimental Group, which will experience the changed variables. 2. A variable which can be manipulated by the researcher 3. Random distribution 	<ul style="list-style-type: none"> • Posttest-only Control Group Design • Pretest-posttest Control Group Design • Solomon Four-group Design

3. Quasi-experimental research design	<p>A quasi-experimental design is similar to experimental, but it is different in the assignment of a control group in that participants of a group are not randomly assigned.</p> <p>Quasi-research is used in field settings where random assignment is either irrelevant or not required.</p>	
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A specific procedure in doing experiments is called “Double-blind Experiment”. It is an experimental design in which neither the respondents nor the researchers know which is the experimental and which is the control group. The purpose of using double-blind experiment is to avoid bias from both the researcher and respondents.

Level of Measurement

The data collection by quantitative approach is numerical in nature. The researcher has to know different “types of numbers” so that he/she could choose appropriate statistics to deal with the data. These “types of numbers” are often referred to as the level of measurement. There are 4 levels of measurement: **nominal**, **ordinal**, **interval** and **ratio**. “Measurement is the assignment of numbers or codes to observations. Levels of measurement are distinguished by ordering and distance properties.” (Norusis, 1990)

In other words, each level of measurement is a description of a number and what it stands for. Table 5 illustrates the four levels of measurement.

Table 5: Four Levels of Measurement

Level of Measurement	Definition	Example
Nominal	Variables with attributes of being able to be classified into mutually exclusive categories	gender, religious affiliation, hair color, birthplace, nationality
Ordinal	Variables with attributes which can be logically ranked in order, but the distance between each order might not be known	socioeconomic status, level of conflict, happiness
Interval	Variables for which the actual distance between attributes is the same	temperature (Fahrenheit Scale), IQ score
Ratio	Variables has attributes meeting the requirements of an interval measure, and has a true zero point	temperature (Kelvin Scale), age, length of time, number of organizations, number of children

Data Analysis

After data collection, the researcher has to find out the meaning behind the data through data analysis. Quantitative data analysis is “the techniques by which researchers convert data to a numerical form and subject it to statistical analysis” (Rubin & Babbie, 2016, p.505). While computer programs can facilitate analysis, it is the researcher who needs to strategically, creatively, and intuitively analyze the data. Data analysis is the process of systematically applying statistical and/or logical techniques to describe and illustrate, condense and recap, and evaluate data. Analysis should be approached as a critical, reflexive, and iterative process that cycles between data and an overarching research framework. It is crucial for researchers to keep a keen sense of the overall project including the main objectives, strategically plan what and how data should be analyzed,

think their way through analysis for interpretation, and find out the relationships between the variables.

In operation, the researcher should manage his/her data throughout the data analysis process. Managing data involves: (1) familiarizing himself/herself with appropriate software; (2) developing a data management system; (3) systematically organizing the data; (4) conducting a preliminary screening; and (5) entering the data into a computer program.

The first stage of analyzing data is data preparation, where the aim is to convert raw data into something meaningful and readable. It includes three steps:

1. Data validation
2. Data editing
3. Data re-coding

The first level of quantitative data analysis is to describe the data. This body of statistics is called **descriptive statistics** as follows.

1. Frequency distribution (percentage)
2. Measures of central tendency (mode, median, and mean)
3. Dispersion (range, quartiles, variance, and standard deviation) and
4. Distribution (skewness and kurtosis)

In describing frequency distribution, besides **tables**, **bars** or **pie charts** or **histograms** are used to show the distribution of responses pictorially.

In reading statistics, an important statistic should be noticed, which is **Standard deviation**. It is a statistical measurement of the amount a number varies from the average among a set of numbers. A low standard deviation means that the data is very closely related to the average, thus very reliable.

A high standard deviation means that there is a large variance between the data and the statistical average, and is not reliable.

Inferential Statistics

Inferential statistics allow researchers to assess their ability to draw conclusions that extend beyond the immediate data (generalization), i.e.: (1) if a sample represents the population; (2) if there are differences between two or more groups; (3) if there is/are change/s over time; or (4) if there is a relationship between two or more variables. There are a variety of relationships which can be explored through the use of inferential statistics: differences, associations, predictions. Inferential statistics are crucial in that these techniques are used to test hypotheses researchers make in the study. In reading inferential statistics, an important statistic should be noticed, which is **significant level**, the probability that the result of a test is a result of chance. Usually significant level is set at 5% (0.05) or lower. When reading the result of a statistical test, those below the significant level implies that the result is significant, and the variables have correlations, or casual relationship. For those with significant level higher than 0.05, it implies that the relationship between the variables cannot be established.

Table 6: Comparison of Descriptive Statistics and Inferential Statistics

Descriptive Statistics	Inferential Statistics
Describe the sample	Make inference from the sample and generalize to the population
Organize, analyze and present the data in a meaningful manner	Compare, test and predict future outcome
Describe the data	Try to draw conclusions about the population beyond sample
Means, median, mode, range, standard deviation	Correlation, cross-tabulation, groups comparison, regression

Cross-tabulation. This is often a first useful step in seeing if there are differences or similarities between variables/categories in either nominal or ordinal measurement. A cross-tabulation table (contingency table) shows the number and percentages of each category in a sample, from which relationships between variables may be noticed. It is useful when the researcher has subgroups which he/she wishes to compare, as it tests to see whether distributions of categorical variables/subgroups differ from each other. The **Pearson Chi Square** test tells people whether the results of a crosstab are statistically significant. It can be used as a test of Goodness of Fit, which determines if sample data matches with a population, or the sample follows a normal distribution.

Causal Relationship

Causal relationships constitute the core of scientific understanding. These are very much required for purposes of explanation and prediction.

Statistical association means a pattern of change in one variable seems to appear in a manner that is related to another variable. The association may be in the same direction (positive) or in opposite direction (negative). Two variables are in positive correlation when they change in the same direction, while they are in negative correlation when they change in opposition direction. Pearson correlation is the common test for correlations between variables.

Besides testing the correlation between variables, causal relationships are needed to test which variables (independent) influence which variables (dependent), i.e. finding out the causal relationship between variables. Usually, only variables having strong correlation may have casual relationships. T-test or ANOVA is a common test to check if there are significant differences between two groups (T-test) or three or more groups (ANOVA) and find out causal relationship between variables.

A strong test on causal relationship is regression analysis, which is a test to find out which variable/s has/have strong impact on a variable.

Conclusion

Practice makes perfect. For research beginners, technical difficulties may be encountered in different stages of the research process. Thus, a Project Supervisor is assigned to students in the course: Social Work Honours Project. The guidance and supervision delivered by the Project Supervisor will provide a solid foundation to the students, in terms of knowledge, skills and experience sharing in the research process. However, it is the responsibility of the students to commit themselves in the research process, so that they could complete their research project and enjoy themselves throughout the process.

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