

Effects of a Mentoring Program for in Infant and Child for Married Female Immigrant Women

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Abstract

Purpose: This study was conducted to examine the impact of a mentoring program on the self-esteem, social support, stress, and efficacy of child-rearing among married female immigrants with an infant or young child. Methods: A non-equivalent control group pretest-posttest design was used. Participants were 56 female immigrants with an infant or a child in Y city. The treatment group (n=28) underwent a mentoring program that included 11 sessions. Data were analyzed by the Chi-square test and t-test using SPSS/WIN 21.0 statistical software. Results: The treatment group reported significantly higher scores for self-esteem, social support, and parenting efficacy, and lower scores for stress related to child-rearing compared with the control group. Conclusion: Our results indicate that this mentoring program had a positive effect on female immigrants. Therefore, it is suggested, that the mentoring program be used to immigrant women at multicultural support center help to adjust to the childrearing experience and this will enhance the quality of family life of immigrant women in Korea.

Key Words: Immigrant, mentoring, child rearing

1. Introduction

The rapid globalization of South Korea has resulted in a multicultural society through an increase in marriage between people of different nationalities [1]. During the year 2013 married cases were 322,807 and 25,963 cases of marriage are international and 2.4%, 7,656 cases which is between Korean women and foreign male. And the number of foreign women who have married Korea men accounted for 5.7%, 18,307 cases, the interest in marriage is exalted throughout society [2]. Currently, the majority of female immigrants experience marriage and childbirth while simultaneously adapting to a new family, language, and social situation in terms of Korean culture [3]. In order to promote healthy and constructive independent support for multicultural families, there are over a 1000 multicultural supportive organizations providing Korean language classes, family education, education on multicultural understanding, and counseling services including comprehensive and systematic support of integrated operational programs [4]. However, according to the Ministry of Gender Equality and Family Survey, 73.5% of female immigrants from multicultural families complained of difficulty in relation to parenting and education. In particular, the majority of female immigrants reported language and communication issues, a culture of maladaptive parenting, cultural barriers, a lack of confi-

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dence in their role as a mother, maladaptive children, high stress levels, and a sense of burden associated with raising children [6]. Therefore, there is a need for systematic provision for consultation, knowledge, and education in relation to female immigrants and child-rearing.

The previous research for recent immigrant women has children is limited to related to child rearing and education status, and progress has been piecemeal and temporary programs. In other words, respect for diversity and individuality of immigrant women and systematically helping their child-rearing, research on the changing patterns of migrant women appearing in this application process is almost no situation. Hence, in this study we assessed a mentoring program for female immigrants with infants to provide assistance in relation to child-rearing and marriage.

1.1 Purpose

To confirm the effects of self-esteem, social support, and parenting-related stress on female immigrants, and parenting efficacy through a mentoring program.

First, determine the level of self-esteem and social support between participating married female immigrants in mentoring program and in multicultural programs.

Second, measure stress level in parenting between married female immigrants in mentoring program and in multicultural programs.

Third, determine efficacy in parenting between married female immigrants in mentoring program and in multicultural programs.

2. Methods

2.1. Study Design

A non-equivalent control group pretest-posttest design was used was used to determine the effects of a mentoring program for female immigrants, which included the following aspects: self-esteem, social support, parenting-related stress, and parenting efficacy.

2.2. Participants

Eligible participants could be interviewed, agreed to participate in the study, and were female immigrants with infant children. First, we took into account the environmental impacts on female immigrants with infants or children registered at the Y Multicultural Family Support Center and K Multicultural Health Family Support Center (covering K city and surrounding rural areas). After selecting the 28 subjects in the experimental group, a matched control group of 28 subjects was selected based on the following characteristics: age, character actor age, educational level, period of residence in Korea, and number of children. Determine sample size is $G * Power 3.1$ of the test program measures ANOVA $(1-\beta) = .80$, for a two-sided significance level $(\alpha) = .05$, effect sizes $(d) = .30$, calculated as a result of minimum sample size of each group to consider dropouts over 26 people, therefore, 30 people on each group, total of 60 peoples selected. Conditions vary, nationality to nationality, but lake of mentor from nationalities illustrated below excluded from this survey {Mongolia, Uzbekistan, Cambodia}, participants are ethnic Korean, Filipino, Vietnamese. Final participants were 26 people in experimental group and 26 in the control group. After selection of 26 people in each group in the selection, subject to homogeneity between the two groups, mating method formula {i.e. age, marital age, educational level, residence in Korea, number of children) were selected as 26 people in control group.

2.3. Assessments

2.3.1. Self Esteem

The self-esteem scale was adapted from a previously developed self-esteem measurement [15, 16]. This tool consists of 5 positive and 5 negative questions, giving a total of 10 questions. Negative questions had a higher score, the processing station question the self-esteem high [16] was Cronbach's alpha reliability coefficient was 0.85, in this study it was 0.81.

2.3.2. Social Support

The social support scale was obtained from another scale that was restructured based on expert advice [17, 18]. Each question was answered on a 5-point scale where each point indicated a higher level of agreement, with higher scores indicating a high level of social support. Cronbach's alpha reliability coefficient was 0.86 in a study by [18], in the present study it was 0.86.

2.3.3. Parenting Stress

Parenting Daily Hassles [19], which measures the everyday stresses related to parenting contains 20 items and was developed in a study by [20], was revised to include 18 items. These were measured on a 5-point Likert-type scale, where "not at all" was 1 point, "usually" was 3 points, and "very much so," was 5 points, with a high score relating to a high level of stress felt by the mother in daily life. Cronbach's alpha reliability coefficient was 0.73 in the study by [20], in this study it was 0.94.

2.3.4. Parenting Efficacy

To measure parenting skills was developed the Perceived Parenting Competence tools by [21], and was adapted by Han [20]. Although Source tool was composed of Likert Scale, under Control Scale for unwieldy to control their children and themselves in parenting and Parenting Confidence Scale to measure confidence in her role that parents originally developed for school-aged children as 4-point Likert scale 12 items of the 15 questions in Parenting Confidence Scale considering the applicability of the age of Korean culture and infants, and select three items from the Under Control Scale 14 items was used to configure a total of 15 questions [21]. The 12 items of the 15 questions in Parenting Confidence Scale considering the applicability of the age of Korean culture and infants, and select three items from the Under Control Scale 14 items was used to configure a total of 15 questions. In the present study, responses were measured on a 5-point Likert scale, with a higher score denoting a high level of parenting efficacy. Cronbach's alpha reliability coefficient was 0.89 in the study by Han [9], in this study it was 0.86.

3. Research Proceedings

3.1 Preliminary Investigations and Mentor Training

To develop a mentor training program for the preliminary investigation of female immigrants in relation to child-rearing, research tools developed based on the educational needs of female immigrants were studied [22]. 1) multicultural immigrant women of child-rearing difficulties: 8 questions 2) the need for parent education programs; 2 item 3) parental education program content (improving parental qualities; 5 questions, 5 questions infant development based information, educational way to help infant development; 12 items, health, safety and nutrition 12 items, daily 8-hour parenting questions) 4) how to

programs (education the number one item, training time, 3 items classifying the subjects into four regions educational needs of immigrant women were studied over a total of two times.

See the research tools developed by the educational needs of immigrant women were studied over a total of two times.

First survey was conducted among 22 people receiving Korean language education in a multicultural family support centers in the J city on October 7, 2013, a second survey was conducted for 27 people attended Korean Culture program for immigrant women in Y Multicultural Center on November 14 .

72% of the subjects were shown to have no difficulty for people to discuss parenting, 42.3% of the training program is very much needed and 53% in response to the needs 95.3% showed the need for training programs. Research on educational content needs a Likert 4-point scale (very much want to know, want to know, do not want to know, do not want to know at all) was used.

The survey results showed a high needs in child's health, safety, the need for nutrition, parental quality improvement, based on infant development, educational way to help young children to month, day-to-day life when parents had to act in order. But multicultural immigrant women showing higher needs of health, safety and nutrition, the enhancement of quality information and reflect parents to the needs of multicultural practitioners Pregnancy and childbirth, and currently lectures for the content of multicultural immigrant women on parenting plans (multicultural recognition, understanding family culture) was decided to include in the program content. Prior to the mentoring program, mentors were recruited and selected based on a mentor recruitment memorandum attached to the Multicultural Family Support Center Board. Mentor has more than 15 years living in married migrant women as possible to participate in three months positive mentor trainees in Korea. 15 subjects completed the mentor training education program but two Mentor can't participate in mentoring programs on personal circumstances were excluded from the mentoring program. They received mentoring program aims to train the mentor training, the mentor of self-discovery, considerations of the mentee selection, mentoring type of decision, the nature and content determination of mentoring, mentor of the self-strengthening initiative, mentoring, and training and mentoring program content. Female immigrants in multicultural marriages have increased need in terms of quality information on health, safety, nutrition, and pregnancy and childbirth; therefore, we decided to include lectures in the program with content relating to parenting plans, multicultural recognition, and understanding family culture. Results from interviewers, comprised 10 college students, prior to mentoring program targeted to married immigrant women with mentors who are active in mentoring for married immigrant women did not have variety activities to illustrate in which was suggested by a multicultural student mentoring reference book published by the Department of Education and the Korea Scholarship Foundation can be learned from mentoring programs, coursework, aptitude activities, etc. But more important thing than most children's education-related mentoring are important, but there were many comments about priorities that need strong support for multicultural mother through conducting mentoring for difficulties and challenges of parenting, overcome their stress, provide health information.

Also, substantially migrant women working as senior mentors of the same nationality than Korean mentor should be a priority to participate in programs to acquire knowledge and share the information was stressed.

Prior to the mentoring program, the mentor recruitment memo was attached to the Multicultural Family Support Center Board to recruit and select mentors.

Mentors are 15 in numbers with if possible, participated in Mentor Training Program for 3 months who have been lived more than 15 years as married migrant women in Korea. 15 subjects completed the mentor training education program, but the two cannot par-

ticipate, therefore, excluded from the mentoring program. Mentoring educational program was a mentor of self-discovery, considerations of them to select, mentors type of decision, the nature and content determination of mentoring, mentor of the self-strengthening initiative, mentoring activities, and mentoring program content.

3.2. Mentoring Program

Prerequisites condition for mentors for marriage migrant women to produce a mentoring program for migrant women, even after an investigation conducted [14-22] in order to receive verification of the information, including the validity, the program was modified and complemented by received advisory comments from a nursing and a children's nursing professors with a professor of early childhood education majors, and a professor of social work, and a professor specializing in parental education and counselor at multicultural center. The program of the study was conducted for 2 hours per week it made a sum of, total 11 sessions.

This study was conducted from November 2013 to January 2014 for 2 hours per week covering 10 sessions<Table 1>. The first session was an orientation session to introduce the mentoring program, and to introduce the number of mentors and mentees. The second session covered real-time mentoring through the use of mobile phones, email, and internet cafes for online sharing of information, announcements, and feedback between program participants relating to membership of the program. After the mentors and mentee were assigned to each group, the respective groups made contact. The third session covered the concept of multiculturalism, multicultural families, and recognition in society. The fourth looked at identifying the subjects' strengths and needs, and looked at information relating to their spouses' strengths. Five 2-day sessions were conducted covering cultural aspects such as relatives' manners, customs, eating habits, and food, and communal activities including a lecture on Korean culture and recreation and a South Korean cooking competition. The sixth session provided information on pregnancy and childbirth (in the form of a video). Participants from each country talked about pregnancy, birth, culture, and cultural differences between their native country and South Korea. The seventh and eighth sessions covered infant development, nutrition, health (in the form of a movie), basic information on vaccination laws, and the creation of a story about children's nutrition by country. The ninth session covered first aid and common diseases in infants and their symptoms, e.g. digestive and respiratory conditions, food poisoning, diarrhea, trauma. In the tenth session, a lecture was given on the subject of healthy parenting, and then participants shared their experiences and stresses related to parenting and aimed to change the parenting attitudes of participants, and a program improvement plan was announced for each mentor-mentee team in relation to child-rearing; thereafter, mentees were given a gift in return for their participation and the mentors were thanked.

Table 1. Overview of the Mentoring Program

Session & topics	Contents	Methods
1 st session	<input type="checkbox"/> Introducing and greeting of researcher and research assistants <input type="checkbox"/> General overview of the program	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Dicussion
2 nd session	<input type="checkbox"/> Introducing and greeting of among participants(Mentors and mentees) <input type="checkbox"/> Snack and acquaintance time among participants	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Dicussion

3 rd session	<input type="checkbox"/> Concept of multiculturalism <input type="checkbox"/> Multicultural families, and recognition in society.	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Discussion
4 th session	<input type="checkbox"/> Identifying the mentors' and mentees' strengths and needs	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Discussion
5 th session	<input type="checkbox"/> Korean culture: manners, customs, eating habits, and food, and communal activities <input type="checkbox"/> Korean cooking competition	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Discussion <input type="checkbox"/> Recreation
7 th session	<input type="checkbox"/> Signs and symptoms of pregnancy <input type="checkbox"/> Fetal development, <input type="checkbox"/> Antepartum and postpartum self-care: bathing, exercise(animation and demonstration) <input type="checkbox"/> Summary quiz	<input type="checkbox"/> Lecture(Powerpoint Presentation, animation) <input type="checkbox"/> Discussion
8 th session	<input type="checkbox"/> Quiz on previous class <input type="checkbox"/> Infant development: nutrition, vaccination <input type="checkbox"/> Summary quiz	<input type="checkbox"/> Lecture(Powerpoint Presentation, animation) <input type="checkbox"/> Discussion
9 th session	<input type="checkbox"/> Quiz on previous class <input type="checkbox"/> Common disease: digestive and respiratory conditions, food poisoning, diarrhea, trauma, sign and symptoms which need a visit a pediatrician <input type="checkbox"/> Summary quiz	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Discussion
10 th session	<input type="checkbox"/> Quiz on previous class <input type="checkbox"/> Lecture of healthy parenting: overcoming of stress about child rearing, attitude of parenting	<input type="checkbox"/> Lecture(Powerpoint presentation) <input type="checkbox"/> Discussion

3.3. Data Collection

The total period of data collection was done from January 6, 2014 to March 13, 2014. First we visited the Y Multicultural Family Support Center and K Multicultural Family Health Center to explain the purpose of the study and the training programs for the field center, and it was determined that they would cooperate. The experimental group were to create a poster of "healthy children and healthy parents" with a mentor during a one-month program at the Multicultural Family Support Center that would be displayed in the market, hallways, and classrooms in print, with information on programs provided by e-mail and telephone. First, we conducted preliminary research to married migrant women who wish to participate in research for eight weeks and twice a week from 10am to 12pm and conducted a mentoring program for raising healthy children in the welfare classroom. The research program was conducted we did post-survey after provide refreshments allow to ask questions. After the pre-survey for the control group we distribute the booklet which was developed for this study, and follow-up survey was conducted after 8 weeks. We did post-survey after finish the program with having question time and we provide refreshment. Four research assistants were placed in order to debriefing. Research assis-

tants understood the purpose of the research and were selected from graduates of a four-year college program in nursing or hospital nurses who wished to participate. The research assistants were trained for approximately two hours on the methods and procedures for collecting data directly from female immigrants at the Multicultural Family Support Center. After that, researcher made research assistant to conduct preliminary survey for immigrant women and conduct a preliminary investigation into interpreting the results of the research assistant.

We check if there is a difference in the issue of the results analysis by research assistant and differences in interpretation between research assistants. Then this researcher conducted refresher training to research assistants until it is determined that the interpretation of the response and procedures for survey are matching and began the survey after confirming that there is no difference between research assistants.

If participants did not understand part of the study, mentors of the same nationality who were fluent in Korean were requested to interpret the questionnaires. Survey responses were collected when it was deemed the subject had a complete understanding of the question.

3.4. Ethical Considerations

This study was approved by S University Research participant protection Ethics Committee (SMU-2013-09-007-01) to collect data. Explain the purpose and intent of the study prior to the start of the interview to be understood and to protect the ethical aspects of the study participants during the study process and made research agreement and confirmation documents. In addition, we obtained permission from the chief engineer of the institution and the social worker.

3.5. Data Analysis

Data were analyzed using the SPSS/WIN 18.0 program as follows:

First, the demographic characteristics of the subjects were analyzed to give actual and percentage values, means, and standard deviations. Second, any differences in characteristics and study variables between the experimental and control groups (in relation to self-esteem, social support, parenting stress, and parenting efficacy) were analyzed using the χ^2 -test and t-test. Third, the effect of the mentoring program was analyzed using the repeated measure ANOVA.

4. Results

4.1. Demographics of Participants

There were no significant differences between the experimental group and the control group for the following general characteristics: age, nationality, education, religion, monthly income, and period of residency in Korea (Table 2).

Table 2. Characteristics of Participants

Characteristics	Categories	Exp.(n=28)	Con.(n=28)	χ^2	p
		n (%)	n (%)		
Age	20-24	4 (14.3)	2 (7.1)	4.087	.252
	25-29	14 (50.0)	14 (50.0)		

	30-34	7 (25.0)	9 (32.1)		
	35	3 (10.7)	3 (10.7)		
Nationality	China	4 (14.3)	5 (17.9)	1.244	.537
	Vietnam	12 (42.9)	15 (53.6)		
	Philippines	12 (42.9)	8 (28.6)		
Education level	Middle school	3 (10.7)	4 (14.3)	.339	.844
	High school	20 (71.4)	18 (64.3)		
	College	5 (17.9)	6 (21.4)		
Education level	High school	20 (71.4)	22 (78.6)	.381	.537
	College	8 (28.6)	6 (21.4)		
Religion	Yes	20 (71.4)	16 (57.1)	1.244	.265
	No	8 (28.6)	12 (42.9)		
Monthly in- come	100	2 (7.1)	4 (14.3)	3.061	.382
	101-200	14 (50.0)	10 (35.7)		
	201-300	9 (32.1)	13 (46.4)		
	301	3 (10.7)	1 (3.6)		
Stay in Korea (months)	24	3 (10.7)	5 (17.9)	.683	.877
	25-36	8 (28.6)	8 (28.6)		
	37-48	13 (46.4)	12 (42.9)		
	49	4 (14.3)	7 (12.5)		

4.2. Participants and Homogeneity Testing of Variables

There were no significant differences between the experimental group and the control group for the following homogeneity test of dependent variable (Table 3).

Table 3. Homogeneity Test of Dependent Variable

Characteristics	Exp.(n=28)	Con.(n=28)	t	p
	M (SD)	M (SD)		
Self-esteem	2.83 (.44)	2.90 (.33)	-.635	.528

Society support	3.29 (.28)	3.22 (.63)	.562	.577
Stress of rear	4.01 (.63)	4.11 (.49)	-.636	.527
Parenting efficacy	2.78 (1.49)	2.75 (1.40)	.318	.752

4.3 Effects of the Mentoring Program

The group ($F= 34.508$, $p < .001$), time elapsed since implementation of mentoring ($F=65.183$, $p<.001$), and the group and time interaction ($F= 6.936$, $p < .001$) all had significant effects on self- esteem of participants. With respect to the participants' self-esteem before and after application of mentoring program, the score for self- esteem felt by the participants 1 month after mentoring was 3.27 points in the control group, 3.59 points in experimental group. The score for self- esteem felt by the participants 3 month after mentoring was 3.32 points in the control group, 3.89 points in experimental group. The score for self- esteem felt by the participants 6 month after mentoring was 3.48 points in the control group, 4.14 points in experimental. Therefore, significant differences were observed among the two groups ($p < .001$). The group ($F= 18.388$, $p < .001$), time elapsed since implementation of mentoring ($F=52.628$, $p<.001$), and the group and time interaction ($F= 6.936$, $p < .001$) all had significant effects on society support of participants. The group ($F= 12.047$, $p =.001$), time elapsed since implementation of mentoring ($F=88.221$, $p<.001$), and the group and time interaction ($F= 12.254$, $p < .001$) all had significant effects on stress of rearing for participants. The group ($F =36.013$, $p < .001$), time elapsed since implementation of mentoring ($F=52.343$, $p<.001$), and the group and time interaction ($F=10.318$, $p < .001$) all had significant effects on parenting efficacy of participants. (Table 4).

Table 4. Homogeneity Test of Dependent Variable

Variable	Group	Baseline	1Month	3Month	6Month	Source F	P
		M (SD)	M (SD)	M (SD)	M (SD)		
Self-esteem	Con.(n=28)	2.83 (.44)	3.27 (.39)	3.32 (.31)	3.48 (.38)	G	34.508 < .001
	Exp.(n=28)	2.90 (.33)	3.59 (.44)	3.89 (.45)	4.14 (.35)	T	65.183 < .001
	t	-.635	-2.828	-5.420	-7.657	G×T	6.936 < .001
	p	.528	.007	< .001	< .001		
	Con.(n=28)	3.29 (.28)	3.53 (.39)	3.77 (.41)	3.84 (.47)	G	18.388 < .001
	Exp.(n=280)	3.22 (.63)	3.89 (.35)	4.06 (.45)	4.51 (.41)	T	52.628 < .001
Society support	t	.562	-3.579	-2.454	-5.562	G×T	7.879 < .001
	p	.577	.001	.017	< .001		

	Con.(n=28)	4.01 (.63)	3.78 (.32)	3.53(.25)	3.44(.56)	G	12.047	.001
	Exp.(n=28)	4.11 (.49)	3.49 (.42)	3.08 (.40)	2.81 (.41)	T	88.221	< .001
Stress of rear	t	-.636	2.826	4.899	4.807	G×T	12.254	< .001
	p	.527	.007	< .001	< .001			
	Con.(n=28)	2.78 (1.49)	3.03 (.54)	3.18 (.93)	3.47 (.59)	G	36.013	< .001
	Exp.(n=280)	2.75 (1.40)	3.51 (.52)	4.06 (.31)	4.37 (.46)	T	52.343	< .001
Parenting efficacy	t	.318	-3.335	-4.744	-6.317	G×T	10.318	< .001
	p	.752	.002	< .001	< .001			

* Con=Control group, Exp=Experimental group, G=Group, T=Time

5. Discussion

Recently, low fertility aging society marriage spanning a significant impact on the country's population size and structure migrant women are contributors to the country's maternal fertility change in Korea, is a man who stands as the feminine presence [9]. In addition, immigrant women's health and well-being, nurturing environment for children is the quality of the future population, and further because they have the important meaning in the qualitative dimension of the future labor force needs to actively develop a variety of programs to support them [23]. This study provides a mentoring program to support parenting targeting migrant women and self-esteem that effect, social support, parenting stress, and examine changes in parenting efficacy. Self-esteem and social support for immigrant women was increased after performing a mentoring program. After performing mentoring immigrant women's self-esteem has continued to increase to 3.56 points from average of 2.75 points after the program, and keep increased to 3.89 points after four weeks. Though there is no similar study to compare to this study, youth mentoring program implementation of the study in a mentoring program has increased self-esteem [24]. In the study of multiculturalism, navigate to the mentoring process for the infant home-based parenting support of the mother to form a positive self-esteem is same as this study [14]. In fact, migrant women are often reluctant to meet with South Korean with experience of discrimination and neglect only because they are foreigners [14]. For this reason, immigrant women are afraid of entering into new relationships and showed a contraction behavior without having the self-confidence, and it has been limited to format a network of Korean cultural information especially knowledge and information about child care due to the limited relationship with others. However, a mentoring program of the present study was to look at the passive attitude turns to a positive attitude by exchanging a mutually complementary assistance between mentees and the individual forms a positive self-esteem by having an opportunity for a flexible self-growth. And social support was increased by 3.56 points after performing from 3.25 points before the program is running, and after the 4 week of the program it was continuously increased up to 3.78 points. In this study, a mentor in a mentoring program with the same nationality as the person first immigrants who have experienced other cultures and learn through training and culturally appropriate skills and behaviors [25]. Korea Culture and parenting has got a wide range of information, including a lack of knowledge and information associated with the mother, linking the community, counseling believed such a case the result is shown to be a collaborative effort with each other. In this study, carried out the program execution decreased stress and parenting efficacy was increased after program execution. Therefore, rather than

at the individual level to solve a variety of problems, such as immigrant women of child-rearing 1 to 1 mentoring, if not, closer relationship with a person who has or experience same problem with their Social Support Network to organize such as self-help groups, while securing the available resources and the various off-line program development of immigrant women to improve the responsiveness of the problem not the one-time but continues to be applied, evaluated and redevelopments are necessary.

Stress for rearing of Parents' in this study was decreased gradually by 3.01 point from 3.82 point after program is carried out and it reached to 2.32 point after four-week of the program and parenting efficacy was increased to 3.56 point from 2.26 after performing the program and it was continuously increased to 3.78 point after four-week.

Most of the migrant women are childbearing age and experience pregnancy and childbirth without sufficient advance planning and preparation before they adapt to life in Korea [26], a high prematurity rate and low birth weight, and prevalence of anemia and, cervical cancer, virus infection and poor nutritional environ showed that high levels of poor health [27].

Married female immigrant has responsible for the health of a family member particularly for child rearing and health with these risk factors under the condition of not having an opportunity to learn parenting, health knowledge and information. Even if they have an opportunity, they are having a difficulties in acquiring the right knowledge and information because of a lack of comprehension and, understanding in Korean language and it showed a high stress level in parenting since they feel differ and isolated in Korean society as a raising subject due to the fearing that their limits are affecting to their own child rearing.

But mentoring program of this study give a variety of information related to the type and timing, first aid for infants and children in the developmental stage, the basic child-rearing information include vaccination routine children healthcare by providing expertise in video, models, etc. Due to the role of knowledge and information providers have a close relationship with a mentor, participants have a confidence and a positive parenting and parenting stress was decreased.

In particular, a call for assistance directly to mentor in situations such as a high fever and fracture during the mentoring process solved the problem. Thus mentor was committed to providing a variety of support for the mentee's needs and circumstances to encourage the mentee based on an honest attitude and confidence and that the consultation was also provided through the intimate relationships and emotional support.

According to a study [29], provide information related to childbirth and parenting is the most important to married immigrant women who is participate in variety of activities for Korean education, childbirth and parenting issues to obtain a variety of information about work for strengthening the role as a mother. Therefore, concrete and systematic support through diversified educational program on not only pregnancy and childbirth but also on parenting should be provided to suit the needs of married immigrant women.

It is intended for immigrant women is related to the development of parenting education programs related to child support and mentoring from insufficient state study provided a mentoring program and verifies its effectiveness can be called great significance of this study. Mentor support to achieve personal goals to the subject in need of the difficulty in mentally and socially, and serves as supporting coach, who is influential assistance.

6. Conclusions

In comparison with the control group, the experimental group that participated in the mentoring program showed a significant increase in self-esteem and parenting efficacy, and a decrease in parenting-related stress over the study period. Based on this study [31], different nations should ensure ongoing mentoring programs are provided that take into account the distinctive characteristics of each country and cultural background. However, currently multicultural family centers providing parenting support programs to female immigrants are not widespread and only provide one-off events. Therefore, to support various aspects relating to female immigrants and their children we propose the introduction of a follow-up study applying a systematic and ongoing mentoring program.

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