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Beliefs about child TV viewing in low-income Mexican American parents of preschoolers: Development of the Beliefs about Child TV Viewing scale (B-TV)

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Abstract

Objective: Parental beliefs about child television viewing may affect the way parents regulate child television viewing. Despite this, little research has focused on the development of measures of parental beliefs about child television viewing, particularly among ethnic minority parents and parents of young children. This study's objective was to develop and test a culturally-based measure of parental beliefs about television viewing in low-income Mexican American mothers of preschoolers.

Methods: Using a cross-sectional study design, 22 items reflecting parental beliefs about influences of TV on children were developed and assessed for psychometric properties in a sample of 312 low-income Mexican American mothers of preschoolers.

Results: Using exploratory factor analysis, we identified 4 factors reflecting 4 domains of parental beliefs: Positive General Beliefs, Positive Sleep-Related Beliefs, Positive Functional Beliefs, and Negative General Beliefs. Internal reliabilities were acceptable (Cronbach's alpha =

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0.70–0.89) for all factors except Negative General Beliefs (Cronbach's alpha = 0.61). Positive Sleep-Related Beliefs and Positive Functional Beliefs were correlated with children's average daily hours of TV (r=0.16, P<0.01; r=0.22, P<0.001, respectively) and with mother's average daily hours of TV (r=0.14, P<0.05; r=0.22, P<.001, respectively), providing initial support for construct validity.

Conclusions: The Beliefs about Child TV viewing (B-TV) scale measures 4 domains of parental beliefs regarding child TV viewing, and has good initial reliability and validity for 3 factors. Future use will allow investigators to conduct more in-depth evaluations on the influence of parental beliefs on the way parents shape their child's use of the TV.

Keywords

Child; Parenting; Media; Latino; Mexican American; television; beliefs; preschool

Background

Ethnic disparities in child screen media use exist.[1, 2] Young Latino children in low-income families view over 30 minutes more television (TV) daily than similarly-aged, low-income, non-Latino white children.[1] Among screen devices, the TV, which is viewed daily by most children, is the main screen device used by young children.[1] TV viewing accounts for over half of the average 2 hours a preschooler uses screen media daily.[1] Time spent viewing TV is associated with such outcomes as obesity, attention problems, and inadequate sleep in young children.[3–6] Higher viewing amounts in Latino children may contribute to the higher prevalence of some screen-related outcomes, such as obesity.[7] Latino children are at high risk for obesity in early childhood.[7] Interventions addressing screen use in this population are critical to reducing disparities in screen-related outcomes.

Parents shape the way their children use television. For example, parents restrict the amount of TV viewing time and/or the content their child watches.[8] Health behavior theories, including the Information, Motivation, Behavioral Skills Model and Health Belief Model[9, 10], suggest that parental beliefs about the impact of TV may shape parental decisions to regulate or encourage children's TV use. There is some empirical evidence to support this. [11–14] For example, parents who believe that TV programs teach good things are more likely to instruct children about TV content.[12] Others have found that parents with more negative attitudes toward television are more likely to have rules regarding total television time, yet such attitudes are not related to rules about program content.[15]

Despite the importance of parental influences on young children's TV viewing, there is a surprising lack of systematic scale development or psychometric evaluation in this area. This is particularly true for measures appropriate for low-income Latino parents. Indeed, to our knowledge, the Parental Beliefs about TV Viewing (POETV) is the sole existing scale reporting the development and psychometric properties of a measure of parental beliefs about child TV viewing. Published after data collection for this study was complete, the POETV was developed for parents of school-age (6–12 years old) children and evaluated in a multi-ethnic sample.[16] Given evidence that beliefs and parenting practices regarding TV vary by child age, the development of a measure of beliefs specific to parents of children

under 5 is warranted.[17, 18] The lack of careful development and psychometric assessment of measures of parental beliefs regarding the influence of TV on children has greatly hindered understanding in this area. Because TV viewing habits are established early in life, a measure of beliefs in parents of young children holds the potential to offer an understanding of motivators of parental behaviors aiming to shape TV use in these early years.[19]

The objective of this study was to use a culturally-based approach to develop a measure of beliefs about the effect of TV viewing on preschool children from low-income Mexican American families. We focus specifically on Mexican Americans because, amongst Latinos, country of origin, which is related to varying health beliefs and behaviors, must be considered.[20–23] Mexican Americans are the largest subgroup of Latinos, representing 65% of Latinos.[24]. Because 16% of all children in the US are Mexican American, this work has the potential to impact a large group of children.[25, 26]

Methods

Qualitative and quantitative methods were used to develop and test a measure of maternal beliefs about television viewing in low-income Mexican American mothers of preschoolers. This study is part of a larger study that aimed to test this measure and a measure of parenting practices regarding TV viewing[27] and to evaluate the relationship of such domains with child TV use in this population.

Measure development

Beliefs regarding TV viewing: Items were developed from the findings of 21 semi-structured qualitative interviews conducted with low-income Mexican American mothers of preschoolers.[28] Interviews used open-ended questions stemming from review of the literature, discussions among the investigative team, and feedback gathered through pilot interviews to explore maternal beliefs and ways in which mothers shape their child's use of the TV. From the main themes identified in these interviews, 22 items were created to represent belief themes.[28] Response options were strongly agree, sort of agree, sort of disagree, and strongly disagree.

Expert review: To maximize content validity, 2 outside experts in the field of parenting practices regarding TV viewing provided specific feedback on item relevance as well as the representativeness of the developed items.

Translation: Items were translated into English or Spanish as needed, and both language versions of each item were compared and discussed by bilingual team members. Translations were evaluated and adapted to ensure cultural appropriateness and conceptual equivalence using decentering.[20] In the decentering process, both language versions are considered of equal importance, and thus alterations are made to either language version to ensure conceptual equivalence.

Field pretest: Cognitive interviewing was utilized to identify problems with participant comprehension/interpretation of items and/or processing difficulties.[29] Thirty-seven

cognitive interviews were conducted in English or Spanish with participants meeting the same eligibility criteria as the main sample. Interviews were discussed iteratively and alterations were made to items repeatedly as needed.

Survey administration

Sample: A convenience sample of participants was recruited from September, 2013 to May, 2014 from 3 pediatric safety net clinics in Denver, CO. The clinics were chosen because a large percent of the population they served were low-income Latino families. A research assistant approached individuals in the waiting room of these clinics and introduced the study. Eligible participants were Spanish- and/or English-speaking female primary caregivers of Mexican descent with a child 3–5 years of age and a TV at home. Because over 98% of the participants reported that they were the biologic mother to the focal child, we refer to participants in this study as mothers. For participants with >1 eligible child, a focal child was chosen at random. Approval of this study was obtained from the university institutional review board.

Procedures: Research assistants (RAs) were trained in all aspects of the study, including conducting the interview in a standardized way. Participants were screened for eligibility at the clinic, consented, and then enrolled by phone. RAs orally administered survey items in a 1 hour phone interview. Oral administration was chosen to avoid literacy issues, which are common in low-income populations.[30] Study data were collected and managed using REDCap electronic data capture tools.[31] Participants were instructed when answering the belief items that they were to think of their focal preschool aged child who was 3–5 years old and to remember that there were no right or wrong answers. Participant remuneration was a gift card to a major retailer ($25).

Measures: In addition to the 22 belief items, data were collected on demographic factors and television use. Demographic items included focal child age and sex, maternal age, number of years of education, cohabitation status (yes/no), number of other children in the home (excluding the focal child), employment status (yes/no), hours of employment each week, childcare, and acculturation level. Maternal employment was categorized as not employed, part-time employment (25 hrs/week), and full-time employment (> 25 hours/ week). Acculturation was measured using an adapted version of the Spanish and English language use subscales of the Bidimensional Acculturation Scale for Latinos.[32] These 2 subscales contained 5 items with responses ranging from never(1) to always(5). Responses in each subscale were averaged. Higher scores represent greater acculturation in the specific domain (English or Spanish).

To evaluate construct validity, we asked mothers about average daily hours of TV viewing by the focal child, mother, and father. Child average daily hours of TV viewing was measured with 2 items about typical weekday and weekend viewing adapted from the Early Childhood Longitudinal Study – Birth Cohort.[33] Responses for weekday and weekend amounts were weighted by 5 and 2 respectively, then summed and divided by 7. Because parents were not the focus of the study, single items were used to capture parent average daily hours of TV viewing. Additionally, an adapted item from the *Zero to Six* [8] study

asked the average daily hours the TV was on in the home even if no one was watching it. Responses >24 hours/day were considered implausible and dropped (child viewing: n=1, TV on in home: n=1).

Analyses

Exploratory factor analysis (EFA) was conducted to assess the underlying factor structure of the 22 items, using maximum likelihood estimation and promax (oblique) rotation. Promax rotation was chosen because some level of correlation among factors was anticipated.[34] Given the problems associated with commonly used criteria for factor selection in EFA (e.g., the Kaiser criterion), we chose maximum likelihood estimation because, even in an EFA framework, it allows for the calculation of more formal model goodness-of-fit indices to evaluate the performance of the model at an overall level and relative to alternative models [35, 36]. Model fit indices included the root mean square error of approximation (RMSEA) and chi-square difference tests.[35] RMSEA values under 0.05 are considered desirable and those under 0.08 considered acceptable.[37] Models were also compared to one another using chi-square difference tests. Models with 1 to 4 factors were evaluated; in addition to RMSEA and chi-square values, the final model was selected based on model convergence, model interpretability, and the observed scree plot. Four items that were worded in the opposite direction of the majority of the items were reverse coded prior to EFA modeling. Once the final factor structure was chosen, the internal consistency reliability of the items loading on each factor was examined using Cronbach's alpha. Composite subscale scores were then created by calculating the mean of the items in a given factor; higher scores reflected stronger endorsement of the belief. Subscales scores were examined in relation to demographic variables using Pearson's correlation coefficients. To assess construct validity, subscales were also examined in relation to the amount of child TV viewing, parental TV viewing, and time the TV is on in the home using Pearson's correlation coefficients. Mplus Version 7.2 was used for the exploratory factor analysis and SAS Version 9.4 was used for all other analyses.

Results

Demographic characteristics of the 312 participants are shown in Table 1. Participants were on average 31 years old (SD=6.4) and 72.4% cohabited with a partner. Focal children were on average 3.9 years old (SD=0.79) and the majority (51.3%) were not in any type of childcare.

Exploratory Factor Analysis

Based on the model selection criteria, a 4-factor model emerged as the best fit to the data. The RMSEA value improved with the inclusion of additional factors, decreasing from 0.091 (95% CI 0.084 to 0.098) for the one-factor model, to a good-fitting value of 0.054 (95% CI 0.044 to 0.063) for the 4-factor model. Furthermore, based on a Chi-square difference test, the 4-factor model fit significantly better than the 3-factor model ($\chi^2 = 93.82$, p<.001), which fit better than the 2-factor model. Examination of the scree plot also supported the 4-factor model.

Table 2 depicts the rotated factor loadings for the 4-factor solution, with the highest loading for each item presented in bold. Factor 1 was comprised of 7 items related to favorable outcomes of child TV viewing and positive beliefs about food and drink TV commercials; this factor was subsequently labeled "Positive General Beliefs." Factor 2, labeled "Positive Sleep-Related Beliefs", was comprised of 3 items related to TV viewing and sleep. Factor 3, comprised of 6 items measuring beliefs about the functional use of the TV for purposes of managing child behavior (e.g. keep child calm or quiet), was labeled "Positive Functional Beliefs." Factor 4 was comprised of 4 items assessing beliefs about negative outcomes related to child TV viewing and was labeled "Negative General Beliefs" Based on a factor loading cut-off of 0.35, 2 of the 22 items did not load strongly on any factor[38] and were therefore excluded from subsequent analyses.

Table 3 depicts the Cronbach's alpha values and mean scores of the final 4 subscales and the inter-correlations. Alpha values for the first 3 subscales were good ($\alpha = 0.70 - 0.89$), while the internal consistency of the 4th subscale, Negative General Beliefs, was low ($\alpha = 0.61$). The potential subscale means ranged from 1–4, with higher means representing stronger endorsement of the belief. Means for the first 3 subscales ranged from 1.84 to 2.67. The mean for the Negative General Beliefs subscale was 3.28. Examination of the correlations among the 4 subscales showed moderate to high correlations between the first 3 subscales, but low correlations of these with the fourth subscale.

Correlations

Tables 4 and 5 show the relationship of the subscales to demographic and behavioral variables, respectively. Maternal education level was negatively associated with Positive General Beliefs and Positive Sleep-Related Beliefs, but positively correlated with Negative General Beliefs. Cohabitating was negatively associated with Negative General Beliefs. Number of other children in the home, excluding the focal child, and maternal employment were not associated with any of the subscales. The acculturation scales were only correlated with Negative General Beliefs. English language acculturation was positively correlated and Spanish language acculturation was negatively correlated with Negative General Beliefs.

The 3 subscales representing different domains of positive beliefs were related to several of the TV viewing behavior variables, with greater endorsement of positive beliefs in each domain related to increased amounts of television viewing. Positive Sleep-Related Beliefs and Positive Functional Beliefs were positively correlated with average daily hours of child TV viewing. All of the 3 positive beliefs domains were positively correlated with higher mother and father average daily hours of viewing, with the exception of Positive Sleep-Related Beliefs and father TV viewing, which were unrelated. In contrast, the Negative General Beliefs subscale was not related to any of the viewing behaviors.

Discussion

The Beliefs about Child Television Viewing (B-TV) scale is a 20-item measure representing the most comprehensive measure of beliefs about TV viewing in mothers of preschoolers to date. This work, focused on low-income Mexican American families, adds to the very limited existing literature in this area. A 4-factor model emerged as the best model fit. Use

of this measure will aid in our understanding of the role of parental beliefs in shaping child viewing habits. Its importance is underscored by the urgent need for effective interventions to ensure that children, especially those at highest risk, have healthy media habits. Use of this scale could help interventionists to target maternal beliefs influencing child viewing behaviors in this population.

The first subscale, Positive General Beliefs, focuses on TV viewing in general and the content of TV commercials. Few studies have evaluated parental beliefs about TV commercials [12, 39], and to our knowledge none have evaluated beliefs on this topic in this subgroup of parents. Interestingly, we found that positive beliefs about food and drink TV commercials group with other positive beliefs, such as children learning important things from television programs. However, increasing evidence points to food and drink commercials as a potential mechanism for the relationship between TV viewing and childhood obesity[40]. Hence further work identifying parental attitudes about TV commercials and their relationship to parenting practices in this domain would be of value.

Positive Sleep-Related Beliefs represents beliefs about the benefits of TV viewing in association with sleep. As expected, greater endorsement of this subscale was correlated with increased child TV time. Growing evidence points to the negative impact of aspects of TV viewing (e.g. total amount, use before bedtime) on sleep duration and quality.[41] Parents often struggle with their preschoolers' sleep problems, such as establishing healthy sleep habits.[42] Further work is needed to understand the exact media habits leading to poor sleep and ways to support parents regarding their children's sleep. For example, parents may need help in not using screen-time as a way to manage child behaviors before bed. This subscale will be useful for evaluating the influence of parental sleep-related beliefs on child media use and sleep habits in this population.

The Positive Functional Beliefs subscale represents beliefs about the utility of TV viewing for behavioral management. Much press has been given to the use of TV viewing for 'babysitting' a child; items in this subscale represent the wide range of ways parents may utilize child TV viewing to manage child behavior. As expected, this subscale was associated with TV viewing in the home. Future research applying this subscale can examine whether parental endorsement of these beliefs is associated with child behavior issues. One could posit that as children enter into their toddler and preschool years and behavioral issues arise, contextual factors such as limited economic resources or parents working multiple jobs could influence parental beliefs about the functional value of television watching for managing child behaviors. Further research in this area is needed.

Negative General Beliefs focuses on poor outcomes associated with TV viewing. Results from our qualitative work demonstrated the high level of concern low-income Mexican American mothers have about TV content for this age group. Concern specifically focused on content that teaches children bad behaviors/language.[28] Notably, this subscale was not related to viewing amounts, which is interesting given that 2 items relate to outcomes from excessive viewing. It may be that negative beliefs about TV viewing are more strongly related to content rather than time, a possibility supported by work showing that parents of preschoolers are more likely to have rules about TV content rather than about time.[15]

Further research should evaluate whether, in this population, this subscale is associated with parental restrictions on content and the actual type of content children view in order to understand the influence of these beliefs on parent and child behavior.

Maternal education was associated with 3 of the scales. Increasing maternal education levels were associated with less endorsement of the Positive General Beliefs and Positive Sleep-related Beliefs subscales and higher endorsement of the Negative General Beliefs. However, maternal education was not associated with Positive Functional Beliefs. Interestingly, none of the demographic factors were associated with Positive Functional beliefs. This may suggest a broader endorsement of this belief across groups within this population.

The strengths of this study include our focus on one ethnic group in order to capture the beliefs of this group. For many years, scholars of Latino health have emphasized the importance of the developing measures for use in this population.[20, 43] It is important to note that the findings of this study cannot be generalized beyond low-income Mexican American mothers of preschoolers in the southwestern US. Whether these beliefs apply to this population in other geographic regions should be evaluated, as well as whether they apply to other racial/ethnic groups. We employed culturally-based methods, yet it is possible that these beliefs are relevant to other cultures and parents of non-preschool aged children. Limitations of this study include that this is the first use of these items and further evaluation is needed to evaluate construct validity and to establish test-retest reliability. Also, the Negative General Beliefs subscale has a low reliability, hence future work could further explore parental negative beliefs in order to expand the number of items representing this domain. Given that the Negative General Beliefs subscale did not correlate with reported TV viewing amounts, future study could also evaluate its relationship with content viewed. Finally, the oral administration of survey items may have increased social desirability bias. [44]

This measure captures positive and negative maternal beliefs about child TV viewing and the results support the initial validity and reliability of 3 of the subscales. This is the first measure of parental beliefs about TV viewing for parents of preschoolers and the first to focus on measuring beliefs on this topic in low-income Latina mothers. A culturally-based approach was utilized to capture the influence of the sociocultural context. Given widespread media use across groups of children, future work should also focus on other cultural groups and use approaches similar to ours to develop additional measures of beliefs about TV viewing. This could include evaluating how the items presented here apply in other populations.

Implications

The lack of well-developed measures of parental beliefs about TV viewing has hindered knowledge regarding how such beliefs influence parenting practices regarding TV, and ultimately child viewing habits. Health behavior theory and existing evidence indicate that changes in attitudes and beliefs are critical components of behavior change and therefore may need to be addressed in interventions focused on changing child TV viewing.[9, 10] The Beliefs about Child TV Viewing scale (B-TV) offers investigators a way to understand the role of parental beliefs in shaping child TV viewing habits, specifically in low-income

Mexican American parents of preschoolers. In these initial findings, 3 of the 4 scales had good reliability. Further work on this measure is needed to extend knowledge on reliability and validity. This measure has potential to identify parental beliefs which could be targeted in interventions aiming to support the development of healthy media habits in young children in low-income Mexican American families. For example, if functional beliefs are associated with screen-related parenting practices, then addressing these beliefs may be an important aspect of changing parenting practices. Identifying potential targets to be addressed in interventions supporting the development of healthy media habits in young children is critical to the design of future intervention efforts.

Acknowledgments:

Abbreviations:

TV television

AAP American Academy of Pediatrics

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Significance

What's known: Parental beliefs about child television viewing may affect how parents regulate child viewing. Yet, little research has focused on the development of measures of parental beliefs about child television viewing, particularly among ethnic minority parents and parents of young children.

What this study adds: The Beliefs about Child TV viewing (B-TV) scale measures 4 domains of parental beliefs regarding child TV viewing, and has good initial reliability and validity for 3 factors. Future use will allow investigators to conduct more in-depth evaluations on the influence of parental beliefs on the way parents shape their child's use of the TV.

Table 1:

Demographic characteristics of a sample of low-income Mexican American mothers of children 3-5 years of age (n= 312).

	Percent (n) or Mean (SD)
DEMOGRAPHICS	
Child mean age (years)	3.91 (0.79)
Child male sex	53.5% (167)
Maternal education level	10.07 (2.89)
Cohabitating	72.4% (226)
Number of children in the home (excluding focal child)	1.93 (1.20)
Maternal age (years)	31.04 (6.41)
Maternal employment	
Not employed	77.2% (241)
Part-time employment (25 hrs/week)	9.0% (28)
Full-time employment (> 25 hrs/week)	13.8% (43)
Childcare	
No childcare	51.3% (160)
Family member care	30.1% (94)
Structured child care	12.2% (38)
Other care	6.4% (20)
Maternal English language acculturation	2.60 (1.46)
Maternal Spanish language acculturation	3.83 (1.48)
Child: Average daily hours of TV	2.90 (1.91)
Mother: Average daily hours of TV	2.53 (1.73)
Father: Average daily hours of TV	2.17 (1.85)
Average daily hours TV turned on in home	4.96 (4.06)

Table 2:

Promax rotated factor loadings based on exploratory factor analysis of 22 items pertaining to beliefs about watching TV in of low-income Mexican American mothers of preschoolers.

Item	Factor			
	Positive General Beliefs	Positive Sleep-Related Beliefs	Positive Functional Beliefs	Negative General Beliefs
1. Preschool children learn important things from watching TV	**0.62**	−0.11	−0.13	−0.15
2. TV commercials show mostly healthy food for children	**0.59**	−0.01	−0.11	0.18
3. TV commercials show mostly foods and drinks you want your preschool child to have	**0.57**	0.02	0.01	0.17
4. A good way to be together as a family is to watch TV	**0.47**	0.03	0.10	−0.09
5. Watching TV can help preschool children calm down	**0.45**	0.02	0.30	0.00
6. Preschool children learn English by watching TV	**0.42**	−0.12	0.06	0.11
7. Preschool children are entertained by watching TV	**0.37**	−0.07	0.12	−0.24
8. A good way for you to get (child's name) to sleep is to have (child's name) watch TV	−0.17	**0.81**	0.13	−0.06
9. Watching TV before bed can help preschool children sleep better	0.17	**0.64**	−0.02	0.01
10. Watching TV helps preschool children fall asleep	0.24	**0.46**	−0.05	0.06
11. A good way for you to keep (child's name) from bothering others is to have (child's name) watch TV	−0.02	−0.04	**0.89**	0.02
12. A good way for you to keep (child's name) quiet is to have (child's name) watch TV	0.07	−0.04	**0.78**	0.04
13. A good way for you to keep (child's name) calm is to have (child's name) watch TV	0.05	0.05	**0.73**	−0.02
14. A good way for you to keep children from fighting is to have them watch TV	0.00	0.05	**0.73**	0.06
15. A good way for you to keep (child's name) safe when inside the house is to have (child's name) watch TV	0.07	0.14	**0.57**	−0.03
16. A good way for you to get things done is to have (child's name) watch TV	0.13	0.17	**0.47**	−0.03
17. Preschool children can learn bad language from watching TV (R) [*]	0.05	−0.05	0.03	**0.67**
18. Preschool children can learn bad behaviors from watching TV (R)	0.05	−0.10	0.02	**0.63**
19. It is bad for preschool children to watch a lot of TV (R)	0.03	0.13	0.01	**0.43**
20. Watching a lot of TV can lead to behavior problems (R)	−0.06	0.10	0.01	**0.36**
21. Preschool children eat better while watching TV.	0.27	0.24	0.01	0.02
22. Preschool children can learn good behaviors from watching TV	0.25	0.30	−0.01	−0.17

[*]
R= reverse coded

Table 3.

Cronbach's alpha reliability coefficients, means, and inter-correlations for the 4 Beliefs regarding TV viewing (B-TV) subscales.

Subscale	α	Positive General Beliefs	Positive Sleep-Related Beliefs	Positive Functional Beliefs	Negative General Beliefs
Positive Sleep-Related Beliefs	0.70	---			
Positive Sleep-Related Beliefs	0.73	.47***	---		
Positive Functional Beliefs	0.89	.54***	.56***	---	
Negative General Beliefs	0.61	−.03	−.13*	−.09	---
Mean (SD)		2.67 (0.56)	1.84 (0.74)	2.06 (0.80)	3.28 (0.61)

Note.

*
p<.05,

***
p<.001.

Table 4.

Correlations between Beliefs about TV Viewing subscales and demographic variables, in low-income Mexican-American mothers of preschoolers (n=312).

Demographic Variable	Subscale			
	Positive General Beliefs	Positive Sleep-Related Beliefs	Positive Functional Beliefs	Negative General Beliefs
CHILD				
Age (years)	−.01	−.04	−.01	.17**
Male sex	.14*	.00	.05	.08
MOTHER				
Education level	−.13*	−.13*	−.06	.18**
Cohabitating	−.06	−.06	.08	−.16**
Number of children in the home (excluding focal child)	−.004	.08	.07	−.004
Age (years)	−.00	−.02	−.01	−.01
Employed				
Not employed	.08	.08	.01	−.08
Part-time employment (25 hrs/week)	−.04	−.05	−.04	.06
Full-time employment (reference group)	---	---	----	---
Childcare				
No childcare (reference group)	---	---	----	---
Family member care	.04	−.05	.02	.13*
Structured child care	−.02	.03	.01	.12*
Other care	.02	.03	−.02	−.02
English language acculturation	.02	−.01	.02	.29***
Spanish language acculturation	−.04	−.05	−.07	−.23***

*
p<.05,

**
p<.01,

***
p<.001

Table 5.

Correlations between Beliefs about TV Viewing subscales and behavioral variables, in low-income Mexican-American mothers of preschoolers (n=312).

| Behavioral Variables | Subscale | | | |
	Positive General Beliefs	Positive Sleep-Related Beliefs	Positive Functional Beliefs	Negative General Beliefs
Child: Average daily hours of TV	.09	.16[**]	.22[***]	−.05
Mother: Average daily hours of TV	.18[**]	.14[*]	.22[***]	.01
Father: Average daily hours of TV	.23[*]	.01	.19[*]	.06
Average daily hours TV turned on in home	.10	.13[*]	.20[***]	.04

[*]
p<.05,

[**]
p<.01,

[***]
p<.001