

• 科研论著 •

学龄前儿童情绪行为问题及其与家庭因素的相关性研究

肖语涵^{1,2}, 陈天娇¹

1. 北京大学儿童青少年卫生研究所, 北京大学公共卫生学院, 北京 100191;

2. 北京市海淀区妇幼保健院预防保健科, 北京 100080

摘要: **目的** 探讨学龄前儿童情绪行为问题及其与家庭因素之间的相关性, 为其情绪行为问题早期预防提供依据。**方法** 2023 年 3—6 月采用整群抽样方法, 选取北京市海淀区 10 所幼儿园中 912 名 3~6 岁学龄前儿童, 采用长处和困难问卷(SDQ)评估儿童情绪行为问题, 并使用 12 项一般健康问卷(GHQ-12)评估家长心理健康状态, 家长教养压力简表(PSI/SF)评估家长教养压力。应用 χ^2 检验比较儿童情绪行为问题检出率的差异, 多变量 Logistic 回归分析探讨儿童情绪行为问题与家长心理健康状态及教养压力之间的相关性。构建结构方程模型, 检验家长教养压力在家长心理健康状态对儿童情绪行为问题的影响中的中介效应。**结果** 北京市海淀区学龄前儿童情绪行为问题的检出率为 19.0% (173/912), 不同生活行为特征和社会经济状况的儿童情绪行为问题的检出率不同; 家长心理健康状态不良和家长教养压力增高的检出率分别为 18.0% (164/912) 和 20.0% (182/912); 家长心理健康状态不良 ($OR=2.73, P<0.001$) 和家长教养压力增高 ($OR=6.62, P<0.001$) 与儿童情绪行为问题的风险增加有关。家长心理健康状态可以通过家长教养压力对儿童情绪行为问题产生影响 ($\beta=0.25, P<0.001$)。**结论** 家长心理健康状态不良和家长教养压力增高与学龄前儿童情绪行为问题有关。早期识别并干预家长心理健康问题, 缓解家长教养压力对预防学龄前儿童情绪行为问题有积极意义。

关键词: 心理健康; 教养压力; 情绪行为问题; 学龄前儿童; 家长

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Emotional and behavioral problems of preschool children and their correlation with family factors

XIAO Yuhan^{1,2}, CHEN Tianjiao¹

1. Institute of Child and Adolescent Health & School of Public Health, Peking University, Beijing 100191, China;

2. Department of Prevention and Health Care, Haidian Maternal & Child Health Hospital, Beijing 100080, China

Corresponding author: CHEN Tianjiao, E-mail: tianjiaochen@163.com

Abstract: **Objective** To explore the emotional and behavioral problems of preschool children and their correlation with family factors, in order to provide a basis for early prevention of such problems. **Methods** From March to June 2023, a cluster sampling method was adopted to select 912 preschool children aged 3 to 6 years from 10 kindergartens in Haidian District, Beijing. The Strengths and Difficulties Questionnaire (SDQ) was used to assess children's emotional and behavioral problems, while the 12-item General Health Questionnaire (GHQ-12) was employed to evaluate parents' mental health status, and the Parenting Stress Index/Short Form (PSI/SF) was used to assess parenting stress. The χ^2 test was applied to compare differences in the detection rates of children's emotional and behavioral problems. Multivariable logistic regression analysis was conducted to explore the correlation of children's emotional and behavioral problems with parents' mental health status and parenting stress. A structural equation model was constructed to test the mediating effect of parenting stress on the influence of parents' mental health status on children's emotional and behavioral problems. **Results**

The detection rate of emotional and behavioral problems among preschool children in Haidian District, Beijing, was 19.0% (173/912), with varying detection rates among children with different living and behavioral characteristics and socioeconomic status. The detection rates of poor mental health status and increased parenting stress among parents were 18.0% (164/912) and 20.0% (182/912), respectively. Poor mental health status of parents ($OR=2.73, P<0.001$) and increased parenting stress ($OR=6.62, P<0.001$) were associated with an increased risk of emotional and behavioral problems in children. Parents' mental health status could influence children's emotional and behavioral problems through parenting stress ($\beta=0.25, P<0.001$). **Conclusion** Poor mental health status of parents and increased parenting stress

作者简介: 肖语涵(1992—), 医师, 硕士研究生在读, 主要研究方向为儿童青少年卫生。

通信作者: 陈天娇, E-mail: tianjiaochen@163.com

are associated with emotional and behavioral problems in preschool children. Early identification and intervention in parents' mental health issues and relief of parenting stress have positive implications for the prevention of emotional and behavioral problems in preschool children.

Keywords: mental health; parenting stress; emotional and behavioral problems; preschool children; parents

情绪和行为问题是常见的学龄前儿童心理问题,情绪障碍主要表现为焦虑、恐怖、抑郁、强迫等症状,行为问题包括攻击、冲动、说谎、交往不良、多动等^[1]。学龄前期儿童的中重度行为问题可能难以改变并发展成为功能障碍,并影响其成年后的个人发展、问题行为、家庭生活等^[2]。有研究表明,心理健康存在代际传递效应^[3],父母的心理健康与儿童情绪行为问题密切相关^[4]。也有研究表明,父母教养压力对儿童的内化问题和外化问题都会产生影响,具有高水平教养压力的父母会传递一种消极的情感氛围,导致儿童出现情绪问题、退缩行为、攻击违纪等^[5]。以往关于家庭因素与儿童情绪行为问题的研究多集中在家庭结构和家庭功能上,很少涉及家长的内在因素。因此,本研究欲探究家长心理健康状态以及教养压力与学龄前儿童情绪行为问题之间的相关性,为从家庭角度预防和干预学龄前儿童情绪行为问题提供依据。

1 对象和方法

1.1 对象 2023 年 3—6 月采用整群抽样的方法选取北京市海淀区 10 所幼儿园,以幼儿园内 3~6 岁学龄前儿童为研究对象。本次共发放问卷 1 393 份,回收 1 149 份,进行完整性和真实性检验,最终获取 912 份有效问卷,有效率为 79.3%。儿童平均年龄为(4.83 ± 0.99)岁。其中男童 483 人(52.3%),女童 429 人(46.5%)。本研究已获得被调查儿童家长的知情同意,并通过北京大学生物医学伦理委员会审查(批号:IRB00001052-22111)。

1.2 调查方法 研究采用调查问卷的方法在线上 and 线下进行数据收集,班级负责人经过培训,负责发放和回收问卷,并督促填写。

1.3 一般人口学信息 主要包括儿童性别、是否独生子女、是否早产、喂养方式、每日户外活动时间、视屏时间^[6]、睡眠时间^[7]、家长文化水平、家庭月收入、母亲生育年龄、家长夫妻关系。

1.4 儿童情绪行为问题 采用长处和困难问卷(Strength and Difficulties Questionnaire, SDQ)父母版评估学龄前儿童情绪和行为问题。SDQ 问卷包括 25 个条目,可分为情绪症状、品行问题、多动/注意不能、同伴交往问题、亲社会行为 5 个因子以及困难总分。困难总分体现学龄前儿童客观困难程度,

得分越高,存在的客观困难越严重。本研究采用困难总分作为评估学龄前儿童情绪行为问题的指标,当困难总分 ≥ 14 分时,可判定儿童存在情绪行为问题^[8]。SDQ 已在上海建立常模,信效度良好^[9],本次研究总问卷 Cronbach's α 系数为 0.721。

1.5 家长心理健康状态 采用 12 项一般健康问卷(the General Health Questionnaire-12, GHQ-12)评估父母心理健康状态。该问卷共有 12 个条目,总分越高心理健康水平越低。本研究按照双模态(0-0-1-1)的评分标准进行评分,将所有条目得分相加后, GHQ-12 总分 ≥ 4 分时,可判定家长心理健康状态异常,即家长心理健康状态不良。该问卷已经广泛应用于社区人群和精神科病人的心理健康状态筛查,信效度良好^[10-11]。本次研究问卷 Cronbach's α 系数为 0.808。

1.6 家长教养压力 采用养育压力量表简版(Parenting Stress Index/Short Form, PSI/SF)对家长的教养压力进行评估。该量表共有 36 个条目,得分越高,表明教养压力越大。当教养压力总分 ≥ 85 分时,可判定家长教养压力异常,即家长教养压力增高^[12]。目前,我国关于父母的教养压力的研究多用此问卷反映父母教养压力水平。本次研究问卷的 Cronbach's α 系数为 0.918。

1.7 统计学方法 应用 χ^2 检验比较不同特征学龄前儿童情绪行为问题检出率的差异;以学龄前儿童情绪行为问题(正常=0,异常=1)作为因变量,以家长心理健康状态(正常=0,异常=1)、家长教养压力(正常=0,异常=1)作为自变量,在控制相关混杂因素后,建立多变量 Logistic 回归方程,分析学龄前儿童情绪行为问题与家长心理健康状态及家长教养压力的相关性。采用 SPSS 26.0 进行数据分析。使用 AMOS 26.0 进行中介效应检验。采用 Harman 单因素检验法进行共同方法偏差检验,共析出了 16 个公因子,其中析出的第一个公因子变异为 19.83%,因此本研究中不存在明显的共同方法偏差。 $P < 0.05$ 差异有统计学意义。

2 结果

2.1 研究对象的基本情况 912 名 3~6 岁学龄前儿童中,情绪行为问题平均得分为 9.44 ± 4.52 ,共检出 173 名困难总分异常的儿童,检出率为 19.0%。

心理健康状态不良的家长为 164 名,检出率为 18.0%;教养压力增高的家长为 182 名,检出率为 20.0%。

2.2 不同特征学龄前儿童情绪行为问题检出率比较 儿童每日户外活动时间、视屏时间、家长文化程

度、家庭月收入、母亲生育年龄以及家长夫妻关系间对学龄前儿童情绪行为问题的检出率均有显著影响($P<0.05$);当家长心理健康状态不良和家长教养压力增高时,学龄前儿童情绪行为问题的检出率均更高($\chi^2=43.213,122.976,P<0.001$)。见表 1。

表 1 不同特征学龄前儿童情绪行为问题的检出情况
Tab. 1 Detection of emotional and behavioral problems in preschool children with different characteristics

儿童特征	分组	人数	检出人数	检出率(%)	χ^2 值	P 值
性别	男	483	96	19.9	0.549	0.459
	女	429	77	17.9		
独生子女	是	447	96	21.5	2.671	0.102
	否	465	80	17.2		
早产	是	846	159	18.8	0.614	0.433
	否	47	11	23.4		
生后 6 个月喂养方式	母乳喂养	559	97	17.4	3.943	0.139
	混合喂养	282	65	23.0		
	人工喂养	69	14	20.3		
每日户外活动时间(h)	<2	269	66	24.5	9.134	0.010
	2~	441	68	15.4		
	≥3	196	36	18.4		
视屏时间(h)	≤2	870	158	18.2	8.031	0.005
	>2	42	15	35.7		
睡眠时间(h)	≥10	749	134	17.9	3.173	0.075
	<10	163	39	23.9		
家长文化程度	高中及以下	51	25	49.0	37.637	<0.001
	大学专科及本科	575	112	19.0		
	研究生及以上	286	36	12.6		
家庭月收入(元)	<10 000	100	34	34.0	19.015	0.001
	10 000~	228	46	20.2		
	20 000~	161	21	13.0		
	30 000~	137	25	18.2		
	>40 000	258	44	17.1		
母亲生育年龄(岁)	<25	48	17	35.4	11.866	0.008
	25~30	355	69	19.4		
	31~35	318	48	15.1		
	>35	191	39	20.4		
家长夫妻关系	融洽	758	128	16.9	13.091	0.001
	一般	140	40	28.6		
	不融洽	14	5	35.7		
家长心理健康状态	正常	748	112	15.0	43.213	<0.001
	异常	164	61	37.2		
家长教养压力	正常	730	86	11.8	122.976	<0.001
	异常	182	87	47.8		

2.3 家长心理健康状态和教养压力与学龄前儿童情绪行为问题的相关性分析 多变量 Logistic 回归分析结果显示,家长心理健康状态不良时,学龄前儿童发生情绪行为问题的风险是家长心理健康状态正常儿童的 3.28 倍;在控制相关混杂因素后,家长心理健康状态不良的儿童发生情绪行为问题的风险仍然是家长心理健康状态正常儿童的 2.73 倍。家长教养压力增高时,学龄前儿童发生情绪行为问题的风险是家长教养压力正常儿童的 6.99 倍;在控制相关混杂因素后,家长教养压力增高的儿童发生情绪

行为问题的风险仍然是家长教养压力正常儿童的 6.62 倍。见表 2。

2.4 家长教养压力在家长心理健康状态对学龄前儿童情绪行为问题影响的中介作用 对家长心理健康状态、家长教养压力以及儿童情绪行为问题进行回归系数检验发现:家长心理健康状态能够预测儿童情绪行为问题,家长心理健康状态得分越高,儿童情绪行为问题得分越高($\beta=0.30,P<0.001$);家长心理健康状态能够预测家长教养压力,家长心理健康状态得分越高,家长教养压力越大($\beta=0.48,P<0.001$)。

表 2 家长心理健康状态和教养压力与学龄前儿童情绪行为问题的多变量 Logistic 回归分析
Tab. 2 Multivariate logistic regression analysis on the correlation of parental mental health status and parenting stress with emotional and behavioral problems in preschool children

项目	模型	S _x 值	Wald χ^2 值	OR 值	95%CI	β 值	P 值
家长心理健康状态	I	0.20	40.19	3.28	2.22~4.83	1.19	<0.001
	II	0.20	37.01	3.22	2.18~4.78	1.17	<0.001
	III	0.21	24.51	2.73	1.79~4.16	1.00	<0.001
家长教养压力	I	0.19	105.31	6.99	4.83~10.13	1.94	<0.001
	II	0.20	103.53	7.22	4.94~10.55	1.98	<0.001
	III	0.20	86.43	6.62	4.44~9.84	1.89	<0.001

注：模型 I 为未调整混杂因素；模型 II 为调整儿童相关混杂因素，包括性别、独生子女、早产、出生后 6 个月喂养方式、每日睡眠时间、每日视屏时间以及每日户外活动时间；模型 III 为调整儿童和家长相关混杂因素，包括性别、独生子女、早产、出生后 6 个月喂养方式、每日睡眠时间、每日视屏时间、每日户外活动时间、家长文化程度、家庭月收入、母亲生育年龄、家长夫妻关系。

构建结构方程模型，采用 Bootstrap 方法对家长教养压力的中介作用进行检验，模型为饱和模型，路径分析见图 1。分析结果表明家长教养压力在家长心理健康状态对儿童情绪行为问题中起到完全中介作用 ($\beta=0.25, P<0.001$)。

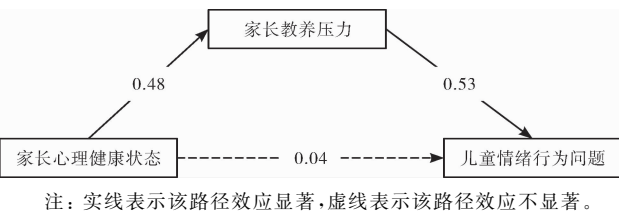


图 1 家长教养压力中介作用路径图

Fig. 1 Pathway of the mediating role of parenting stress in the relationship between parental mental health status and children's emotional and behavioral problems

3 讨论

在本次研究中，采用长处和困难问卷共检出 173 名困难总分异常的儿童，检出率为 19.0%。高于上海 (18.29%^[13])、河南 (15.1%^[14])、安徽 (18.65%^[15]) 等地，这应该引起家长和相关部门的重视，应及时关注儿童情绪行为的异常，采取有效的预防措施，避免发展成为严重的精神心理问题。

3.1 家长心理健康状态不良以及家长教养压力增高是学龄前儿童情绪行为问题的危险因素 本研究发现，家长心理健康状态不良的儿童发生情绪行为问题的风险是家长心理健康状态正常儿童的 2.73 倍，与美国关于儿童青少年心理健康与父母心理健康关联的研究结果相近^[16]。Dean 等^[17]的研究指出，家长存在心理健康问题的后代出现社会心理问题的可能性高出 13 倍。研究也发现父母初始抑郁症状与 4 岁儿童内化行为问题增加有关^[18]，父母焦虑抑郁的儿童比情绪正常父母的儿童更容易患上可

诊断的精神疾病^[19]。家长教养压力增高的儿童发生情绪行为问题的风险是家长教养压力正常儿童的 6.62 倍，在高水平的教养压力影响下，父母往往会伴随着焦虑抑郁情绪、有更多的挫折体验同时产生更多的同辈比较，这无疑会渲染不良的家庭氛围，阻碍家庭中的情感流动^[20]。儿童对父母的情绪变化非常敏感，长期受到不良情绪影响，儿童也更容易出现情绪行为问题。另外，教养压力较高母亲更倾向于采用专制和严厉的教养方式，高度控制儿童的言行，甚至采取体罚等方式提高儿童的执行力以及依从性，长此以往，会导致儿童产生焦虑抑郁情绪以及问题行为^[21-22]。

3.2 教养压力在家长心理健康状态和儿童情绪行为问题之间发挥中介作用 心理健康状态不佳的个体往往会表现出焦虑、抑郁，低价值感等情绪，这也是家长教养压力的重要影响因素^[23]。心理健康状态会影响个体对自己、对儿童和周围环境的评价，从而影响其与子女的互动。另外，依据家庭压力理论^[24]，育儿是家庭中重要的压力源，而父母的心理健康状态可以决定压力源事件对家庭的影响程度^[25]。研究证实，家长心理健康状态如焦虑、抑郁情绪会影响家长的教养压力从而引起儿童的情绪行为问题^[26]，使家庭陷入“父母心理功能失调”、“儿童心理发展不良”等家庭危机^[27]，从而影响儿童发展。

本研究存在一些局限性，如为横断面研究，不能揭示因果关系；家长报告的方式可能产生信息偏倚；影响儿童情绪行为问题的其他危险因素如遗传因素、祖辈带养、母亲孕产期因素等未纳入研究等。

综上所述，本研究发现家长心理健康状态不良和家长教养压力增高是儿童情绪行为问题的危险因素，教养压力可能在其中发挥中介作用。提示预防儿童情绪行为问题，需在关注家长心理状态的同时，指导家长营造和谐的家庭关系，缓解育儿过程中产生的压力，使儿童在安全稳定的家庭环境中健康成长。

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