THE MEDIATING ROLE OF PERCEIVED SOCIAL SUPPORT IN THE RELATIONSHIP BETWEEN ONLINE SOCIAL COMPARISON AND PARENTING SELF-EFFICACY OF MOTHERS

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ABSTRACT

THE MEDIATING ROLE OF PERCEIVED SOCIAL SUPPORT IN THE RELATIONSHIP BETWEEN ONLINE SOCIAL COMPARISON AND PARENTING SELF-EFFICACY OF MOTHERS

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This study, which adopted a correlational research design, aimed to examine the mediating role of perceived social support in the relationship between online social comparison and parenting self-efficacy of mothers. The sample was recruited with a convenience sampling method, and 793 mothers participated in the study. Data were collected using demographic information form, reworded three items from Iowa Netherlands Comparison Orientation Scale, Multidimensional Perceived Social Support Scale, and Perceived Parenting Self-Efficacy Scale. Data were analyzed by using a simple mediation analysis. Results revealed a significant negative relationship between online social comparison and parenting self-efficacy, a significant negative relationship between online social comparison and perceived social support, a significant positive relationship between parenting self-efficacy and perceived social support, and perceived social support partly mediated the relationship between online social comparison and parenting self-efficacy. The findings of the study were discussed by referring to the literature, and suggestions for implications and future studies were provided.

Keywords: online social comparison, parenting self-efficacy, social support, maternal self-efficacy

ANNELERİN EBEVEYN ÖZYETERLİĞİ İLE ÇEVRİMİÇİ SOSYAL KARŞILAŞTIRMA DÜZEYLERİ ARASINDAKİ İLİŞKİDE ALGILANAN SOSYAL DESTEĞİN ARACI ROLÜ

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İlişkisel araştırma deseninin kullanıldığı bu araştırma, annelerin çevrimiçi sosyal karşılaştırma düzeyleri ile ebeveynlik öz yeterliği arasındaki ilişkide algılanan sosyal desteğin aracı rolünü incelemeyi amaçlamıştır. Katılımcılar kolayda örnekleme yöntemiyle seçilmiş ve araştırmaya 793 anne katılmıştır. Veriler Demografik Bilgi Formu, Iowa Hollanda Karşılaştırma Yönelim Ölçeğinden yeniden düzenlenmiş üç madde, Çok Boyutlu Algılanan Sosyal Destek Ölçeği ve Ebeveyn Yetkinlik Ölçeği kullanılarak toplanmıştır. Veriler basit aracılık analizi kullanılarak analiz edilmiştir. Bulgular, çevrimiçi sosyal karşılaştırma ile ebeveynlik öz yeterliği arasında anlamlı negatif bir ilişki olduğunu, çevrimiçi sosyal karşılaştırma ile algılanan sosyal destek destek arasında anlamlı negatif ilişki olduğunu, algılanan sosyal destek ile ebeveyn öz yeterliği arasında anlamlı pozitif bir ilişki olduğunu ve algılanan sosyal desteğin çevrimiçi sosyal karşılaştırma ile ebeveyn öz yeterliği arasındaki ilişkiye kısmi aracılık ettiğini göstermiştir. Araştırmanın bulguları alanyazına başvurularak tartışılmış, uygulamaya ve gelecek çalışmalara yönelik önerilere yer verilmiştir.

Anahtar Sözcükler: çevrimiçi sosyal karşılaştırma, ebeveynlik öz yeterliği, algılanan sosyal destek, anne öz yeterliği

to all victims of the February 6th earthquake and to my beautiful hometown Antakya. We will come back.

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CHAPTER 1

INTRODUCTION

1.1.Background to the Study

With the integration of information and communication technologies into peoples' daily lives (ICT), ICT may accompany women's journey to motherhood from the early days of pregnancy. There are many apps, platforms, and social network sites (SNSs) where pregnant women may find or share information about their pregnancy period (Zhu et al., 2019). However, the role of social media is not limited to the pregnancy process. The postpartum period is an emotionally challenging time for mothers, involving uncertainty and isolation (Strange et al., 2018). According to Newhouse and Blandford (2016), Facebook, a SNS, is a critical source of support and information for women during this period. Furthermore, Morris (2014) studied mothers of children aged three and under and found that mothers use SNSs for seeking and sharing information related to parenting and social support. Oto et al. (2022) noted that SNSs might be valuable since they help keeping in touch with family and friends.

Even though some findings show SNS serves as a social support source, it also has some drawbacks. For instance, it may result in social comparison among mothers, especially when they think they do not fulfill cultural expectations about motherhood (Coyne et al., 2017). Contrary to reality, these expectations require women to hold different roles simultaneously with their best performance. For example, in the past, women were at home and responsible for caring for the child and doing housework. However, in today's world, women's and men's roles are hard to differentiate except in responsibilities in the household (Ridgeway & Cornell, 2004). Motherhood is one of these responsibilities that has been studied for decades, and digital media is now one of the platforms in which mothering issues are discussed and reconstructed (Orton-Johnson, 2017).

Motherhood is discussed with different concepts on the Internet, and Douglas and Michaels (2005) introduced one of these concepts. They pointed out the 'new momism' concept, which is promoted by celebrity mom profiles on the Internet, as a source of guilt for mothers since they promoted the 'perfect mother', 'perfect wife', and 'perfect woman' perception. One principal reason for that is the motherhood representation on social media, including a fit and beautiful body right after giving birth, being fancy and well-groomed every time, enjoying the new role all the time, being knowledgeable about the child development process, seeming like an expert about child nutrition, caring for a baby, and handling all roles with the best performance. Chae (2015) used the alpha-mom term for those mothers creating this kind of content on SNSs. However, in contrast to alpha-mom contents, regular mothers experience physical appearance change, adaptation process, probability of postpartum depression, uncertainty, the process of figuring out motherhood role, increased workload, and struggle. In this context, posting only positive content about motherhood may result in a positive bias for the mothers behind the screen (Wegener et al., 2022). Moreover, the delivery methods, breastfeeding, and attachment processes could depend on personal and health-related factors, but some of the contents on SNSs promote one option and trigger the perception of being more acceptable and valuable than other options. For instance, normal birth and breastfeeding are presented as a success, while a cesarean and formula are presented as a failure. Similarly, feeling a great attachment at first sight is presented as a norm, whereas the need for time for those feelings is underrated.

The discrepancy between reality and what is shown on SNSs took researchers' attention, and social comparison on SNSs was begun to be studied. Kirkpatrick and Lee (2022) suggested that people compare their normal selves to others' best selves since they tend to present themselves better than their actual selves on SNSs. Therefore, even though it is possible to feel confirmed about mothering experiences and practices through social comparison, feeling inadequate, alone, exhausted, and guilty is also quite probable. Consequently, posts that result in positive bias and promote the idea of a 'better option' or 'best way' may lead to social comparison among mothers. The reason for the tendency to make social comparisons can be explained by Festinger's (1954) social comparison theory. He asserted that when there are no objective criteria, a person seeks information and observes others to evaluate themself. Since there are no objective evaluation standards for 'good mothering',

mothers tend to accept what is frequently seen as a norm. For instance, one of these norms is the intensive mothering ideology, which calls for mothers to devote all of their time, resources, and money to the child, be highly knowledgeable about child development, and be primarily responsible for child-rearing (Chae, 2015; Hays, 1996). This ideology is also favored and bolstered by Instamums, mothers who are made famous by Instagram, on SNSs. It is known that making social comparisons puts effort into reducing the gap between the comparer and the comparison target (Festinger, 1954). In line with this situation, mothers may perceive pressure to practice the requirements of this ideology for other mothers since parenting is presented as a 'performance' (Le Moignan et al., 2017). However, reaching the criteria set by this ideology, which is promoted by Instamum profiles on SNSs, is highly demanding and almost impossible to reach for mothers. As an extension of this situation, failing to reach the social comparison target may make mothers feel inadequate. Some findings demonstrate a negative relationship between the level of online social comparison with mothers' well-being and a positive relationship with maternal depression (Coyne et al., 2017; Kirkpatrick & Lee, 2022). All in all, idealized motherhood contents on SNSs, which may lead to online social comparison, promote three themes: the new momism concept, buffering one choice as better than others resulting in inadequacy for mothers, and intensive mothering ideology.

While first-time mothers especially struggle to understand and take their position in their new roles, following mostly perfect motherhood images, content, and posts on SNSs recalls social cognitive theory, which refers to the importance of vicarious experiences (observation and modeling) in the learning process (Amaro et al., 2019; Bandura, 1997). Vicarious experiences are one of the sources for developing self-efficacy beliefs, which points out 'beliefs in one's capabilities to organize and execute the courses of action required to produce given attainments' (Bandura, 1997; p.3). In the developing world, SNSs can be evaluated as one of the sources of vicarious experiences. Similarly, Bandura (2001) claimed that mass media could teach new behaviors, modify existing behaviors, and reshape a person's efficacy beliefs. From this viewpoint, online exposure to perfect motherhood representation and observation of those media contents regularly may contribute to mothers' parenting self-efficacy (Celada, 2010). Parenting self-efficacy is a cognitive construct that is a crucial component of parenting since it influences parenting practices, child development, and

well-being (Coleman & Karraker, 2000). The reason that makes parenting self-efficacy vital is that findings show its negative relationship with depressive symptoms (Barnett et al., 2015), parenting stress (Bloomfield & Kendall, 2012), and anxiety (Porter & Hsu, 2003). Additionally, it was discussed as an influencing factor in parental satisfaction (Gordo et al., 2018; Jeong & Kim, 2016), a facilitator factor in adapting parenting experiences (Biehle & Mickelson, 2011), and a protective factor against postpartum depression (Abdollahi et al., 2016; Giallo et al., 2014). It was also disputed regarding child development, parenting quality, parenting sensitivity, and relationship quality between mothers and toddlers (Albanese et al., 2019). Consequently, it is clear that parenting self-efficacy is an important component of parenting because of its outcomes.

When the representations of motherhood on social media, the importance of vicarious experiences in the learning process, and parenting self-efficacy are evaluated all together, parenting self-efficacy was begun to be studied in social media and social comparison contexts. For instance, Ouvrein (2022) studied the relationship between perceived parenting self-efficacy and online social comparison among mothers and stated a negative relationship between them. Coyne et al. (2017) reported a similar finding that as the level of online social comparison increased, mothers' perceived parenting self-efficacy scores decreased (parenting self-efficacy was identified as parental competence in that study). Germic et al. (2021) also studied the relationship between parenting self-efficacy and engagement with alpha and regular mom content. They found no relationship, but it was an experimental study in which only five pieces of content were demonstrated. Daily and regular exposure results may differ from one shown in an experiment. Considering those results and previous findings on parenting self-efficacy and mental health, a chain between online social comparison, parenting self-efficacy, and mental health may be claimed.

The realization of the significance of parenting self-efficacy and its adverse outcomes on maternal well-being and child development raised the question of how it can be increased. Social support is a valuable source in this regard since it is one of the ways of verbal persuasion to develop parenting self-efficacy beliefs (Bandura, 1997). Also, Razurel et al. (2013) identified social support as a vital variable that helps adaptation mechanisms for mothers after giving birth. Social support can be provided in different ways. Emotional support, material (instrumental) support, informational support, and

appraisal support are types of support that may be offered (Birch, 1998). A mother may need emotional support and appraisal support to overcome the emotional doubt she feels about her capability; she may need informational support and instrumental support since first-time mothers do not know well about the whole process of caring for a newborn baby. As can be understood, all support types are functional for mothers, and feeling supported may help reduce unfavorable experiences in the postpartum period.

Moreover, perceived social support was found to be negatively associated with postpartum depression (Dennis & Ross, 2006; Gan et al., 2019; Jamshaid et al., 2023), parenting stress (Hong & Liu, 2019), and online social comparison (Coyne et al., 2017) whereas positively associated with parenting self-efficacy and maternal well-being (Balaji et al., 2007; Leahy-Warren et al., 2012; Tek, 2021). These results make perceived social support more critical when the negative association between parenting stress and positive parenting behaviors, which affect the development process of a child, is also considered (Respler-Herman et al., 2012).

Drawing upon these findings, it may be claimed that online social comparison and parenting self-efficacy are negatively related, and perceived social support may mediate between associations. It is presumed that perceived social support may be the reason for the relationship between online social comparison and parenting self-efficacy.

1.2. Purpose of the Study

This study aims to understand the extent to which online social comparison predicts maternal parenting via the level of perceived social support among Turkish mothers. The research question of this study is 'Does perceived social support mediate the relationship between online social comparison and parenting self-efficacy of mothers?' Four hypotheses will be tested concerning this question.

H₁: There is a significant relationship between online social comparison tendency and perceived social support levels of mothers (Path a).

H₂: There is a significant relationship between perceived social support levels and parenting self-efficacy of mothers (Path b).

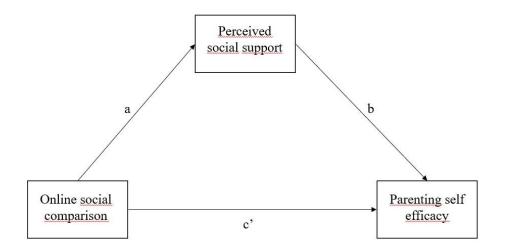
H3: There is a significant relationship between online social comparison tendency and parenting self-efficacy of mothers (Path c').

H₄: Perceived social support level mediates the relationship between online social comparison tendency and parenting self-efficacy of mothers (Path c).

The hypothesized model about these hypotheses is shown in Figure 1.

Figure 1

Hypothesized Model



1.3. Significance of the Study

Mothers may spend more time than usual on the Internet during maternal leave. For instance, it was found that one of the most used times of social media is right after childbirth (Tomfohrde & Reinke, 2016). Even though there are findings that show positive links between mothers' social media usage, perceived social support level (Lei et al., 2022), and maternal well-being (McDaniel et al., 2012); Glatz and Buchanan (2021) discussed social media as one factor that may decrease parenting self-efficacy scores over the years in their longitudinal study. A possible explanation for this might be Chae's (2015) finding which was the association between exposure to idealized motherhood content and social comparison tendency. Since the effect of social media content on mothers is a new topic that took attention, few findings directly explored mothers' social comparison tendency on SNSs. The relationship between social comparison on SNSs and mothers' mental health or parenting burnout was found in

that studies (Coyne et al., 2017; Henderson et al., 2015; Moujaes & Verrier, 2020; Padoa et al., 2018). As discussed above, those mental health outcomes are also associated with parenting self-efficacy. Therefore, it may be suggested that online social comparison contributes negatively to mothers' parenting self-efficacy beliefs, which is associated with adverse mental health outcomes. By considering this assumption, the findings of this study will help to understand if there is any relationship between online social comparison and parenting self-efficacy which is not studied directly in Turkish literature to the best of our knowledge. Thanks to understanding this relationship, it may be possible to develop better intervention program content by considering online social comparison tendency as one of the factors associated with parenting self-efficacy.

Previous research has indicated that social support is crucial in mitigating adverse mental health outcomes of the postpartum period and improving parenting selfefficacy of mothers (Leahy-Warren et al., 2012). Moreover, Leahy-Warren et al. (2012) found that mothers who receive higher levels of social support are less likely to experience postpartum depression, which can ultimately result in better mothering practices and experiences. Angley et al. (2015) also asserted a positive relationship between parenting self-efficacy and perceived social support. In addition to these positive maternal outcomes, Chang (2017) found that greater maternal social support predicted maternal well-being, which is associated with a child's language development by increasing the quality of the learning environment at home. Similarly, perceived social support and parenting self-efficacy beliefs were positively related to better home learning activities and were found as protective factors against parenting stress (Oppermann et al., 2021). As can be understood, perceived social support in the parenting process has many implications for parents and, as a result, for the child. The reason that perceived social support was thought of as a mediator in the present study is that the findings were that perceived social support has a negative relationship with online social comparison (Coyne et al., 2017) and has a positive relationship with parenting self-efficacy (Angley et al., 2015; Leahy-Warren, 2012). Clarifying the relationship mechanism between these variables may help to understand the crucial role of perceived social support in decreasing the risk of making online social comparisons and adverse outcomes of low parenting self-efficacy.

Being a parent may be a complete experience, including love, joy, fulfillment, purpose, responsibility, and uncertainty. It is hard to find an experience that possesses only positive dimensions. parenting self-efficacy may be one variable that makes parenting more satisfying with its contribution to maternal well-being and positive parenting practices. Parents having higher efficacy make a concerted effort to reduce risks and give their children fulfilling experiences, even in the face of numerous pressures (Elder, 1995). Jones and Prinz (2005) stated that parents with higher parenting selfefficacy handle problems they face more positively and constructively and feel more confident about their capability to deal with problems during parenthood than parents with lower parenting self-efficacy. Studies conducted so far have proved negative outcomes of having low perceived parenting self-efficacy for mothers. Mothers in the post-partum period with no parenting experience are at higher risk of experiencing adverse outcomes of having low parenting self-efficacy (Leahy-Warren et al., 2012). Additionally, studies indicated that higher parenting self-efficacy beliefs are associated with more responsive, involving, and softer parenting practices (Glatz & Buchanan, 2015). Concerning these findings, parenting self-efficacy becomes a substantial concept not only for maternal outcomes but also for positive child outcomes. Thereby, exploring factors affecting and linked to parenting self-efficacy is crucial to prevent unfavorable outcomes of low parenting self-efficacy and may help mental health workers in this regard.

When those results are considered together, the findings of this study will help to understand protective factors against online social comparison and low parenting self-efficacy beliefs. It may be possible to develop better intervention programs to increase mothers' parenting self-efficacy beliefs with the help of understanding protective factors related to online social comparison and low parenting self-efficacy. Even though there are studies in which social comparison and parenting self-efficacy, or parenting self-efficacy and social support, were studied, analyzing all variables together and examining the mediator role of perceived social support in the relationship between online social comparison and parenting self-efficacy still needs to be studied. By shedding light on the underlying relationship mechanism between online social comparison and parenting self-efficacy, this study can help mental health workers support mothers who use SNSs to have better parenting experiences.

Consequently, this study aims to promote an understanding of mothers' parenting self-efficacy with regard to the direct effects of online social comparison and indirect effects through perceived social support.

1.4. Definition of the Terms

Social comparison refers to a person's attempt to evaluate their abilities and opinions with others when there are no objective standards (Festinger, 1954).

Perceived social support explains a person's perception of psychological and social assistance from family, friends, and significant others (Yıldırım, 1997).

Parenting self-efficacy defines parents' perceived competency beliefs regarding their parenting roles (Coleman & Karraker, 2000).

CHAPTER 2

LITERATURE REVIEW

This chapter elucidates the conceptualization of the terms, related literature, and studies conducted in Türkiye regarding the variables of the present study: parenting self-efficacy, perceived social support, and social comparison.

2.1. Conceptualization of Parenting Self-Efficacy

Becoming a parent is one of the milestones of a person's life due to its emotional, physical, and economic indisputable effects. It requires investing lots of time and energy, which is specific to this new role (Coleman & Karraker, 1998) and brings lifelong responsibilities, such as being available any time the child needs. Parents try to do whatever they can to perform these responsibilities for the sake of their children, and their perceived parenting self-efficacy highly affects how they do in this process.

A major issue that confuses parenting self-efficacy literature is the interchangeable usage of concepts of parenting competence, parenting confidence, and parenting self-efficacy (de Montigny & Lacharite, 2005; Vance & Brandon, 2017; Wittkowski et al., 2017). In a similar vein, Wittkowski et al. (2017) claimed that the misuse of these terms resulted in ambiguity in the literature and made conceptualization harder for researchers. Considering this situation, various concept analyses and systemic reviews have been done to distinguish these terms from each other. Vance and Brandon (2017) claimed that parenting confidence and parenting self-efficacy concepts have similar antecedents and consequences, while parenting competence is different since it requires an objective evaluation by others. Unlike Vance and Brandon (2017), Glidewell and Livert (1992) distinguished parenting confidence and parenting self-efficacy regarding stability. They defined parenting confidence as a stable concept and identified parenting self-efficacy as situation dependent. However, there are also findings about the stability of parenting self-efficacy which emphasize that it is stable and does not change significantly over time (Gross et al., 1994; Schneewind, 1995).

Consequently, because of the inconsistent usage of terms (parenting self-efficacy, parenting competence, parenting confidence), all of the aforementioned will be regarded as parenting self-efficacy in this thesis.

Parenting self-efficacy can be simply defined as parents' belief about their capability for parenting roles (Coleman & Karraker, 2003). It is evaluated under the self-efficacy construct and has three subdimensions: general parenting self-efficacy, domain-specific parenting self-efficacy, and task-specific parenting self-efficacy (Coleman & Karraker, 2000, 2003; Fang et al., 2021). Dumka et al. (1996) identified general parenting self-efficacy as parents' overall perception of how they do in their parenting roles. Domain-specific parenting self-efficacy refers to the perception of efficacy in a specific aspect of parenting roles, such as encouraging a child's social development (Coleman & Karraker, 1998). Task-specific parenting self-efficacy means competency in particular behaviors such as breastfeeding or the ability to arrange a sleeping routine (Coleman & Karraker, 1998; Fang et al., 2021).

Bandura (1997) stated that a person's efficacy cognition for a specific task impacts practicing skills. There are four sources of information for constructing self-efficacy beliefs: enactive mastery experiences, vicarious experiences, verbal persuasion, and physiological and affective state. Similarly, de Montigny and Lacharite (2005) argued about antecedents of parenting self-efficacy by referring to Bandura's (1997) work. In their concept analyses, four ways were introduced to enhance parenting self-efficacy. The first way, which is called mastery experience, means having previous experience caring for a baby before giving birth. Studies also revealed a significant relationship between the previous experience caring for a baby and parenting self-efficacy perception (Froman & Owen, 1990; Gross et al., 1989). The second way, vicarious experience, refers to comparing one's capabilities with people in similar situations by observing and modeling other mothers. For example, one of the sources to observe and model other mothers is parenting training programs in which parenting self-efficacy perception is enhanced (Bloomfield & Kendall, 2007; Tucker et al., 1998). The third way is verbal persuasion, providing social support from significant others and convincing mothers about their capabilities (Gao et al., 2014; Leahy-Warren et al., 2012; Suzuki et al., 2009). Lastly, enhancing physical and affective well-being is another way to foster parenting self-efficacy since they affect performance. For instance, Chau and Giallo (2015) found that parenting self-efficacy mediated the relationship between parenting fatigue and parenting warmth/hostility. In addition, similar to de Montigny and Lacharite (2005), Coleman and Karraker (1998) identified ways for parents to feel efficacious. These are being knowledgeable about childcare and responses, being confident of performing childcare responsibilities, believing the child will react to their efforts, and believing they will get support from their significant others.

According to Bandura (1997), the development of maternal parenting self-efficacy is a vital source for a successful parenting process. Early articles discussed the development of parenting self-efficacy in terms of childhood experiences (Grusec et al., 1994). Based on the relationship schema from the attachment theory framework, they claimed that parenting self-efficacy development is affected by childhood experiences at some point. For instance, Belsky (1984) reported that childhood experiences and the relationship with parents are essential factors related to parents' parenting behaviors. Deutsch et al. (1988) also studied women in the postpartum period and planning to get pregnant. They found that women with a more positive relationship with their mothers reported more self-confidence in a mothering role and more positive parenting skills expectations. From these results, it can be suggested that parenting practices are vital since they affect the next generations' parenting skills. In another study conducted by Oakley (1980; as cited in Coleman and Karraker, 2003), it was found that women who can visualize themselves as mothers when they are pregnant adapted more easily to the postpartum period and had better parenting skills than those who had difficulty visualizing themselves. Therefore, the readiness to have a child may be questioned before getting pregnant since it is associated with better adaptation and parenting practices.

Although early studies emphasized childhood experiences for the development of parenting self-efficacy, later articles criticized this and showed that it depends on various factors. Some researchers (Ercegovac et al., 2013; Shrooti et al., 2016) emphasized the importance of socio-contextual factors (e.g., perceived social support, age, income level), while others (de Haan et al., 2013; Finzi-Dottan et al., 2011) highlighted the child's nature (e.g., behavioral problems, child characteristics, special needs). Another criticism of primary research on the parenting self-efficacy concept is about participants. Even though parenting comprises mothers and fathers, early scholars' investigation included mostly mother participants (de Montigny & Lacharite,

2005). This situation may arise from gender role assumptions. For example, caregiving responsibilities are associated with women in Western countries (Chrisler, 2013). In this respect, the study of Turkish culture conducted by Erden-Imamoğlu (2013) demonstrated the same gender role assumption. She discovered that men's gender roles are instrumental, whereas women's roles are nurturing.

2.2. Research on Parenting Self-Efficacy

In order to organize factors associated with parenting self-efficacy, they may be examined under the headings of parenting factors, parent-child relationship-related factors, and sociodemographic factors. Parenting factors include parenting satisfaction, parenting stress, parent-child interaction, and maternal depression. Parent-child relationship-related factors cover general health status, temperament, behavioral problems, and development. Lastly, sociodemographic factors consist of the perceived level of social support, age, income level, educational level, and the number of children.

2.2.1. Parenting Factors Associated with Parenting Self-Efficacy

Studies indicated that parenting self-efficacy outcomes associated with parents include two dimensions which are parenting behaviors and parents' mental health. Research on parenting behaviors shows that parenting self-efficacy strongly predicts parenting responsiveness, affecting parent-child interaction quality (Aranda, 2013; Montgomery, 2008). However, there are those (Baker et al., 2013) who stated no association between responsiveness and parenting self-efficacy beliefs. This inconsistency may result from Baker et al.'s (2013) relatively small sample size. There are also studies on mothers having children in preschool in which a strong positive relationship was demonstrated between maternal parenting self-competence and interaction quality between mother and child (Ercegovac et al., 2013). Another study on black mothers found that higher parenting self-efficacy is associated with more promotive parenting strategies (Ardelt & Eccles, 2001). Therefore, it can be said that parenting self-efficacy promotes parenting responsivity and helps to have better interaction quality between parents and children.

Moreover, parenting self-efficacy was explored in terms of parents' mental health outcomes. Porter and Hsu (2003) measured mothers' parenting self-efficacy in the prenatal period. They proposed that maternal self-efficacy is associated with maternal

depression and anxiety measured concurrently. Similarly, Abdollahi et al. (2014) studied pregnant women and aimed to explore factors that predict the development of postpartum depression. Their longitudinal study findings indicated that women with lower parenting self-efficacy are at higher risk for developing postpartum depression. Barnett et al. (2015) also found parenting self-efficacy a predictor of depressive symptoms in mothers. The reason that makes postpartum depression crucial is its adverse effect on parenting behaviors and, as a result, child development. Kleinman and Reizer (2018) studied mothers of children aged between one and six months, a crucial phase of the attachment process. They proposed that postpartum depression is associated with deactivated caregiving practices, and parenting self-efficacy was a mediator between these variables. When longitudinal negative results of the insecure attachment on the person are considered, this finding is crucial to understand the importance of parenting self-efficacy and preventing postpartum depression. Furthermore, a strong relationship was found between maternal depressive symptoms and a child's internalizing problems (Ahun et al., 2018). Additionally, there was a negative correlation between mothers' depression levels and infants' developmental delays (Huang et al., 2013). These are other findings that emphasize the importance of maternal mental health to prevent adverse outcomes on child development.

Parenting self-efficacy was also examined in terms of parenting satisfaction. Some studies demonstrate a positive relationship between parenting self-efficacy and parenting satisfaction. For instance, Gordo et al. (2018) found that mothers reporting less parenting self-efficacy experience less parenting satisfaction. Similarly, Yang et al. (2020) also found a moderate positive relationship between parenting satisfaction and parenting role competence. While some studies show parenting self-efficacy is associated with depressive symptoms and the development of postpartum depression, these findings are not surprising when the effect of depression on mood and focusing on negativity are considered.

Even though the positive sides of having high parenting self-efficacy are discussed mainly in the literature, there are also contrary findings. For instance, Fleisher's (2003) study highlighted the behind-the-scenes of having high parenting self-efficacy. She stated that higher parenting self-efficacy predicted less help-seeking behaviors related to a child's psychosocial problems. According to Jones and Prinz's (2005) findings, parents with higher parenting self-efficacy are more confident about dealing with

issues they face in the parenthood process. From this perspective, it is not illogical to state that less help-seeking behaviors related to a child's psychosocial problems may arise from their capability perception about handling issues. However, the importance of professional help cannot be denied and should be sought when it is required to eliminate adverse outcomes on child development.

2.2.2. Parent-Child Relationship Related Factors Associated with Parenting Self-Efficacy

Parenting self-efficacy predicts child development status and affects parenting practices (Coleman, 1998). From this viewpoint, mothers who feel more capable may be better at parenting practices, leading to better child development. Studies show several ways in which parenting self-efficacy affects a child's development. For instance, parenting self-efficacy was discovered as a protective factor against developmental delay in at-risk family contexts (McDonald et al., 2016). Coleman and Karraker (2003) also found a relationship between parenting self-efficacy and toddlers' scores on Bayley Scales of Infant Development. In addition, Diken and Diken (2008) studied mothers with children with expressive language delay. Their findings showed that mothers with higher parenting self-efficacy engaged with their children using more vital language skills, promoting more significant early language acquisition. Considering these findings, it can be claimed that higher parenting self-efficacy helps to promote better parenting practices.

Additionally, parenting self-efficacy was investigated regarding the child's behavior problems and temperamental issues. For instance, Porter and Hsu (2003) investigated parenting self-efficacy-related factors and the change in parenting self-efficacy over time. Their results suggested that mothers who reported difficult child temperament also reported lower parenting self-efficacy, and parenting self-efficacy levels changed as time passed. Jusiene et al. (2015) longitudinal study with mothers consistently revealed that parenting self-efficacy predicts mothers' rating of their child's behavioral issues. Similarly, several studies reported the same finding (Ahun et al., 2018; Anderson, 2006; Day et al., 1994; Sequerra, 2010). However, it should be noted that these studies do not directly show the cause-and-effect relationship between parenting self-efficacy and a child's behavior problems due to their methodological designs.

A noteworthy study was about the relationship between parenting self-efficacy and a child's health behaviors. Heerman et al. (2017) questioned the child's sleep duration and eating behaviors. Results indicated a positive relationship between parenting self-efficacy and a child's sleep duration and a negative relationship between a child's eating in front of a TV and parenting self-efficacy. It should be reported that it was proved the negative effect of eating in front of the screen for children (Nagata et al., 2021; Pearson et al., 2018). Another finding that should be considered is the child's general health status. A significant difference was found in parenting self-efficacy scores between mothers with and without a child with developmental disabilities (Katkic et al., 2017). Mothers having a child with developmental disabilities had lower parenting self-efficacy scores. From these results, it can be concluded that parenting self-efficacy is crucial in a healthy development process for the child, both physically and psychologically.

Numerous studies examined the parenting self-efficacy relationship with the child's academic achievements. For instance, Bojczyk et al. (2018) investigated the relationship between mothers' maternal self-efficacy and home learning environment. Their path analysis findings showed that parenting self-efficacy has a direct effect on the home learning environment. Furthermore, studies indicated that children whose parents have higher parenting self-efficacy exhibit outstanding academic success at school (Bogenscheneider et al., 1997; Phillipson & McFarland, 2016), and parenting self-efficacy predicted parenting involvement and monitoring, which predicted the academic performance of the child (Shumow & Lomax, 2002).

It is undeniable that parenting self-efficacy is crucial since research demonstrates that it affects a child's development from different dimensions significantly. Although these results emphasize the significance of parenting self-efficacy in a child's development and parenting behaviors, other results show no connection between them. For example, according to Coleman and Karraker (2003), there is no link between overall parenting self-efficacy and toddler adjustment. Similarly, Corapci and Wachs (2002) asserted no connection between parenting self-efficacy and parenting practices. However, findings regarding the positive relationships between positive parenting practices, child development, and parenting self-efficacy are more common in the literature.

2.2.3. Sociodemographic Factors Associated with Parenting Self-Efficacy

Some scholars posited that parenting self-efficacy score variation may result from sociodemographic factors. For instance, Shrooti et al. (2016) stated a significant positive relationship between parenting self-efficacy scores and mothers' age, educational status, occupational status, perceived social support level, income level, and the number of support persons. However, other findings in the literature regarding the relationship of parenting self-efficacy with these variables exist. In some studies, mothers' age, educational level, and income level were not associated with parenting self-efficacy (Ercegovac et al., 2013; Katkic et al., 2017; Murdock, 2013). Similarly, there are null findings regarding the relationship between perceived social support level and parenting self-efficacy (Baker et al., 2013; Katkic et al., 2017). In addition, Ercegovac et al. (2013) reported no difference between occupational status and parenting self-efficacy scores. While some scholars claimed that the number of children is related to parenting self-efficacy (Ercegovac et al., 2013), others found these unrelated (Baker et al., 2013; Katkic et al., 2017).

Considering these results, it may be stated that sociodemographic factors may not predict parenting self-efficacy well. For example, the relationship between the number of children and parenting self-efficacy is logical when the importance of mastery experience is considered in developing parenting self-efficacy. However, as can be understood from the findings, the relationship of parenting self-efficacy with sociodemographic variables may change from sample to sample, and there is a probability of other factors that may influence parenting self-efficacy scores.

2.3. Research on Parenting Self-Efficacy in Türkiye

Parenting self-efficacy studies in Turkish literature can be examined in three dimensions: parenting factors, child-related factors, and sociodemographic factors.

Firstly, Turkish scholars found an association between parents' well-being and parenting self-efficacy. For instance, Bilgin's (2022) study with preschool mothers proposed a significant negative relationship between parenting self-efficacy and the child's separation anxiety and the mothers' separation anxiety. Moreover, it was claimed that the psychological resilience of mothers was positively associated with parenting self-efficacy, and parenting self-efficacy predicted mothers' parenting satisfaction (Kurt & Aslan, 2020; Topaloğlu, 2013). The study conducted by Balat et

al. (2014) indicated a positive relationship between parenting self-efficacy and mothers' anger management skills. Uyanık-Balat (2014) also reported a negative relationship between mothers' depression levels and parenting self-efficacy. From these results, it can be concluded that parenting self-efficacy plays a critical role in mothers' general well-being, which may motivate them to perform better parenting skills.

The second and most studied factor is the relationship between parenting self-efficacy and child development. Özdemir (2019) studied mothers having children in preschool term and found a moderate positive relationship between mothers' parenting self-efficacy and home environment stimulation, which is a crucial issue for the child's cognitive and social development. For instance, Aksoy and Diken (2009), in their review article on the relationship between a child's cognitive, social, and language development and the mothers' parenting self-efficacy, reported a positive relationship between these variables. They stated that parenting self-efficacy plays a substantial role, especially for children in a risky developmental process, and emphasized the importance of empowerment of parenting self-efficacy for child development. In a similar vein, Büyüktaşkapu (2012) studied mothers with children aged between one and three. Her findings highlighted the importance of parenting self-efficacy for child development and indicated a positive relationship between parenting self-efficacy and child development. She also proposed that mothers' parenting self-efficacy is especially low in discipline, playing, and teaching.

Çabuk-Bayam's (2010) research on the relationship between parents' parenting self-efficacy and perception of a child's behavioral problems revealed no relationship between them. However, Seçer et al. (2012) reported that mothers' parenting self-efficacy was negatively associated with the child's behavioral problems. Unlike Seçer et al.'s (2012) study, Çabuk-Bayam's (2010) sample included mothers and fathers; inconsistency regarding the perception of a child's behavioral problem may result from sampling criteria. Considering these results, parenting self-efficacy beliefs are essential for parents' well-being and better child development.

Studies have examined the relationship between parenting self-efficacy and demographic variables. However, the results are inconsistent. In Özdemir's (2019) study, mothers' education and income levels were positively related to parenting self-

efficacy, while mothers' ages were not. Working mothers had higher parenting selfefficacy than non-working mothers, and the number of children was negatively associated with parenting self-efficacy, which was contrary to what the literature suggested. Özdemir (2019) explained that having more children might result in low perceived parenting self-efficacy because the first child may create more curiosity about child development, triggering more searching for child development issues. Kurt and Aslan (2020) claimed a similar positive relationship between mothers' parenting self-efficacy and education level and income level, but they found no relationship between parenting self-efficacy and the number of children. In contrast, Topaloğlu's (2013) study revealed that parenting self-efficacy scores were not related to educational level but related to occupation. Well-educated mothers may be more knowledgeable about parenting strategies that help to promote parenting self-efficacy. Occupational status results in the literature may be explained in terms of mothers' time management skills. Working mothers have less time to spend with their children, which may result in a willingness to spend quality time with the child and, as a result, feeling more efficacious about their parenting experiences. Additionally, working mothers may have a broader social network which may contribute to having more vicarious experiences (Özdemir, 2019).

Demirdöven and Özyürek (2022) studied mothers having a child in the preschool term, and they found that mothers' parenting self-efficacy is associated with parenting attitudes. They reported that mothers with high parenting self-efficacy showed more democratic attitudes in parenting, and mothers with low parenting self-efficacy demonstrated more oppressive and authoritarian attitudes. This finding is meaningful since parents with high parenting self-efficacy are probably more knowledgeable about parenting strategies and how to handle problems they face in the parenting process. They believe in their effects on their children, unlike parents with low parenting self-efficacy. However, it should be stated that there is also a null finding regarding the relationship between mothers' parenting self-efficacy and parenting attitudes (Kurt & Aslan, 2020).

As can be understood from the literature about factors relating to parenting self-efficacy, they interact with each other. For example, lower parenting self-efficacy is associated with maternal depression. Maternal depression is related to less responsiveness and less responsiveness associated with adverse child development

outcomes. From this perspective, promoting parenting self-efficacy and preventing factors that reduce parenting self-efficacy beliefs are crucial.

2.4. Conceptualization of Perceived Social Support

A person is a being who needs social connection. Social support is one of the significant sources that help people in this regard. Shumaker and Brownell (1984, p.13) defined it as "an exchange of resources between two individuals perceived by the provider or the recipient to be intended to enhance the well-being of the recipient." Also, in his social cognitive theory, Bandura (1997) emphasized the importance of the social environment for adaptive and healthy functioning. Social support is significant in its relationship with a person's well-being, and the claim is that supported people have a better well-being than nonsupported people (Cohen & Syme, 1985; Shumaker & Brownell, 1984).

Social support can be examined under received and perceived social support dimensions. Received social support is supportive attempts and the level of social support given by others and institutions, while perceived social support is a person's evaluation, satisfaction, and perception of the support they are given (Burns & Martin, 2020). Support can be provided from many sources, such as families, friends, teachers, partners, coaches, colleagues, teammates, and other individuals and institutions in the local communities (Yıldırım, 1997). Researchers proposed that the importance of the source of support varies across life cycles. For instance, Gariépy et al. (2016) stated that children and adolescents are mainly valued for parenting support, while adults and older people find vital spouse, family, and friends support, respectively.

It is possible to mention some individual differences that influence the reception and perception of social support. Unsurprisingly, people who show support-seeking behaviors when needed, who are extroverted, have a secure and healthy attachment receive more social support than others since they inform their social environment about their support needs (Dooley & Howell, 2020). In addition to these factors, people who can express their feelings also receive more support than others since this expression sends an indirect message of support needs (Pierce et al., 2013). From the emotional expression viewpoint, it is known that in some cultures, because of gender roles, males' emotional expressions are frowned upon. If they do that, they are not evaluated as having a strong personality. Therefore, it may be said that there are also

gender differences in seeking, receiving, and perceiving social support (Barbee et al., 1993; Matud et al., 2003). Perceived social support is also affected by the person's worldview. For instance, people who are pessimists and evaluate mostly negativities in their lives and who are not good at regulating their emotions are less likely to be satisfied with the support they receive (Marigold et al., 2014). Cultural differences that affect social support-seeking and receiving behaviors should also be noted. It was found that it is easier in individualistic cultures to seek support, while in collectivistic cultures finding and receiving support is more challenging. Scholars explained that by mentioning the concern of people from collectivist cultures about the effect of seeking social support in their social network (Kim et al., 2008).

Early scholars discussed two hypotheses to clarify in which circumstances social support is beneficial. The first one is called the buffering hypothesis, which claims it is beneficial only under stress. In contrast, the direct effect hypothesis stated its beneficence on mental and physical health under stressful and unstressful events. Later studies revealed that both theories benefit physical and mental health (Taylor, 2011).

Several studies show the importance of social support for physical and mental well-being (Fasihi-Harandi et al., 2017; Hale et al., 2005). Cohen and Wills (1985) tried to answer how social support affects physical and mental health by explaining the contribution types of social support to health. Birch (1998) described four types of social support which are emotional support (i.e., showing sympathy, caring, and listening when needed), material/instrumental support (i.e., being object resources such as physical help, money, and other materials that may be needed), informational support (i.e., being a guide for the knowledge a person may need), and appraisal support (providing feedback, suggestion, and confirmation about the individuals' process).

The literature demonstrates that social support has a critical and undeniably significant role in human well-being since it was also discovered in terms of its effect on mortality in addition to physical and mental health effects. Some findings show that high social support reduces early mortality while social isolation increases it (Askgaard et al., 2023; Naito et al., 2023). However, although the positive sides of social support are much more in the literature, there are also contrary findings. For instance, Palant and Himmel (2019) interviewed patients with chronic diseases and stated that social

support could be perceived negatively if it is provided, although it is not asked for or the support is overwhelming. Therefore, it may be revealed that support should be offered first and provided in balance if accepted.

As a result, it can be stated that people are the most in-need beings when they are born. A baby animal can walk and survive at some point, whereas a human baby needs to be cared for by someone to stay alive. The need for others and social relations continues throughout life for people to be more resilient emotionally and physically. The awareness of the fundamentality of that source among scholars provided further research on social support.

2.5. Research on Perceived Social Support

Perceived social support is a crucial factor from different dimensions. It reduces the risk of mental health treatment needs and self-labeling when treatment is needed since people who have a good social support system can be integrated into mental health treatment more easily (Thoits, 2011).

Numerous studies with different samples investigated the relationship of perceived social support with mental health variables. For instance, Nenova et al. (2013) explored the relationship between posttraumatic growth, social support, and social constraints in hematopoietic stem cell transplant survivors. Researchers proposed a positive correlation between posttraumatic growth and emotional, instrumental social support. Additionally, Lefkovics et al.'s (2018) study revealed that social support is a protective factor on variables of depressive and anxiety symptoms, which were negatively associated with positive emotions. The role of social support was also studied in minority groups. For example, Pate et al. (2022) asserted that social support should be included in prevention studies of suicidal attempts since their findings indicated a negative relationship between suicidal thoughts and social support among gender-minority adults. From this viewpoint, it can be said that social support plays a significant role in preventing mental health problems and is a facilitator when treatment is needed.

Moreover, Abbas et al. (2019) studied perceived social support among married women to understand its relationship with different variables. Their findings indicated that social support positively correlated with marital adjustment while negatively correlated with stress, anxiety, and depression. K. Holt and Espelage (2007) reported

similar findings in the youth sample regarding the negative association between anxiety, depression, and perceived social support. In addition, Hagihara et al. (2003) investigated the role of social support in the relationship between alcohol consumption and work stress among males. Their findings demonstrated that the influence of social support could be positive and negative according to support type and environmental factors. It is also worth noting that despite findings showing a negative correlation between depression, anxiety, and perceived social support, these studies used self-report scales. It is known that depression may affect a person's perception, and because of this, participants with depressive symptoms may perceive the support they get lower than what they receive. Therefore, it is clear that the perception and influence of social support may vary according to the sample and context.

The importance of social support was also studied in the parenting context. For instance, Esmaelzadeh - Saeieh et al. (2017) longitudinal study findings demonstrated a direct relationship between maternal competence and perceived social support after six and sixteen weeks of birth. They also stated that pregnant women's maternal competency scores decreased as the birth time approached. Since their sample consisted of first-time pregnant women, uncertainty about the new role may result in this fluctuation in maternal competence scores. Additionally, perceived instrumental maternal social support is directly and indirectly associated with the child's socioemotional development with the help of reduced parenting stress (Liu, 2023).

Amadu et al. (2023) studied the importance of social support among mothers of premature newborn babies. They claimed that providing social support to mothers increased their maternal confidence and parenting skills to provide care for their children and increased their coping skills for the stress they experienced during the hospitalization process. Higher parenting stress and lower perceived social support were linked to higher levels of depression, demonstrating once again how important social support is in the parenting process. Chavis (2016) also studied first-time mothers. She proposed that social support provided by family and friends is essential, and a combination of perceived social support and maternal competence is associated with decreased maternal stress. Also, findings demonstrated that social support helps to experience more positive parent-child relationships. For instance, Woźniak-Prus et al. (2023) studied mothers and fathers during the COVID-19 pandemic. They found that parenting self-efficacy and perceived social support were strongly correlated with

positive parent-child experiences. From these findings, higher perceived social support is linked to higher parenting self-efficacy beliefs associated with better parenting practices. Feeling more efficacious about parenting decreases the risk of experiencing adverse outcomes of low parenting self-efficacy, which is also associated with child development. Therefore, social support has a crucial role in preventing negative outcomes of parenting self-efficacy.

2.6. Research on Perceived Social Support in Türkiye

Perceived social support has been studied in different samples, and its importance was emphasized in Turkish literature. For instance, a study on high school students showed that perceived social support negatively correlates with aggression (Gündoğan & Sargın, 2018). When Karakoç and Faraji (2022) researched adults, they found that perceived social support was a mediator between posttraumatic growth and object relations. Similarly, Makas and Çelik (2022) studied adults, and their findings showed that perceived social support mediated the relationship between life satisfaction and emotional expression. A strong positive relationship was also found between life satisfaction and perceived social support among older adults (Çimen & Akbolat, 2016; Yurcu et al.,2017). These results show that perceived social support is important, eliminates some negativities in a person's life, and helps to have better well-being.

Moreover, the importance of perceived social support in technology use has recently been studied. According to the findings, it is a mediator in the association between Internet addiction and perceived stress level (Kavaklı & Yalçın, 2019). Similarly, a relationship between social support and problematic smartphone use was found (Şimşek et al., 2023). Social support may play a preventive role in this regard by providing the opportunity to socialize more and find support sources in real life.

Positive outcomes of social support can also be seen in mothers in the postnatal and prenatal periods. For instance, Çınar et al. (2015) studied mothers and found that perceived social support, specifically from family members, is related to higher breastfeeding self-efficacy and better maternal attachment. Also, a negative correlation between postpartum depression and perceived social support level was reported in another study (Taştan & Demiröz, 2018). In addition to these, Alan Dikmen (2020) explored the relationship between perceived social support, sleeping quality, distress, and depression among pregnant women. She concluded that perceived social support

has a positive relationship with sleeping quality, while it is negatively associated with depression level and distress. Furthermore, Güler and Çınar (2022) studied mothers having preschool-aged children and found a positive association between maternal satisfaction and perceived social support. They stated that support mainly from a spouse played a crucial role in promoting coping strategies for mothers. As can be understood, perceived social support is crucial for mothers for their mental and physical well-being. It is clear that social support from significant others helps mothers to have a better attachment process with their babies and reduces the risk of postpartum depression. From that perspective, Yesilcinar et al. (2016) advised mothers to use social support sources during the postpartum period, and social support sources should be increased for mothers.

However, even though social support is valuable for mothers, the issue is more than its availability. New mothers can be sensitive to the words they hear, but this situation is rarely considered in societies. For instance, a mother at least once hears a sentence emphasizing inadequacy for feeding baby and advising formula with the assumption of 'support'. Research findings showed that the support content is more significant than its availability since mothers may interpret some content as unfavorable (Güler & Yalçınkaya Alkar, 2021).

Consequently, social support is needed across life in different dimensions. Its benefit during the life cycle should be considered. Therefore, providing social support should be a policy, especially for underserved communities, fragile groups, and at milestone points in a person's life to reduce the risk of negative experiences.

2.7. Conceptualization of Social Comparison

The social comparison theory claims that in uncertain situations with no objective evaluation standards, people seek to compare their thoughts and talents to those of others. There are three different comparison styles: (1) horizontal comparison, where people feel roughly equal to others; (2) downward comparison, where people judge their performance to be superior; and (3) upward comparison, where people judge their performance to be inadequate (Festinger, 1954). Even though Festinger was the first scholar to mention social comparison, he started to study the cognitive dissonance theory; other researchers expanded social comparison theory based on nine hypotheses in his article. Fear affiliation theory, which means the comparison of emotions

(Schachter, 1959), and downward comparison theory (Hakmiller, 1966; Thornton & Arrowood, 1966), evolved from social comparison theory.

According to Suls et al. (2002), some factors affect the target selection for social comparison. They claimed that resemblance with the target, previously shared opinions, and a person's expertise are essential factors in the target selection process. Festinger (1954) also underlined that the most reliable information for social comparison is gathered from the person who is the most similar to the comparer. Additionally, while selecting a target to compare oneself, people who value interpersonal community tend to highlight similarities between themselves and others (Gerber, 2020).

The motivation behind social comparison includes self-evaluation, self-improvement, and self-enhancement (Suls et al., 2002; Taylor & Lobel, 1989). Individuals' tendencies regarding the direction of comparison change according to their motives. For instance, when they are under stress (e.g., cancer patients), people use downward comparison with self-enhancement motives to protect their subjective well-being (Taylor & Lobel, 1989; Wills, 1981), while the upward comparison is preferred with self-improvement motives when they need to be inspired (Wills, 1981). However, there are also findings showing that people under stress seek information to compare themselves to someone as good as themselves or better (Gerber, 2020; Molleman et al., 1986). People also tend to use upward comparison to compare themselves in normal circumstances and prefer the upward comparison to compare their abilities to obtain self-knowledge (Gerber, 2020; Suls & Miller, 1977). Upward comparison is mainly preferred when a person's inferiority according to someone is not seen by others (Buunk, 1995; Buunk & Gibbons, 2007). Therefore, it can be said that the direction of comparison is unstable and varies according to the context.

According to the direction of the comparison, a person's reaction may be contrastive or assimilative. Wheeler and Suls (2007) reported that assimilation refers to changing self-estimation in the direction of the comparison target, whereas contrast refers to the opposite. In general, comparison results in contrast rather than assimilation, and upward comparison causes the lowering of subjective well-being, self-esteem, and mood (Gerber, 2020), and expectations about the similarity to the target moderate these negative effects (Buunk et al., 1990). On the other hand, downward comparison

promotes subjective well-being (Stewart et al., 2013) and is used primarily when a threat is felt toward subjective well-being (Wills, 1981). However, it cannot be said that upward comparison always has a negative effect, whereas downward has a positive impact. It should be noted that both directions may result in either contrast or assimilation. For instance, Buunk et al. (1990) discussed upward and downward comparisons, stating that both directions may evoke positive and negative feelings.

Social comparison studies attracted attention from different research areas, including health psychology, personality psychology, and social psychology (Gerber, 2020; Suls et al., 2002), and it was studied based on situational differences context until Wheeler (2000) proposed his study on individual differences. His review indicated that social comparison orientation, gender, age, self-esteem and dysphoria, personality factors, and values are some individual differences that affect the social comparison process.

The social comparison process of gender was primarily examined concerning comparisons of appearance. Females are more likely than males to draw social comparisons in this regard, which is linked to the fact that they are less satisfied with their bodies than men (Gerber, 2020). This situation may result from cultural pressures on females about thinness and being beautiful. For instance, the media triggers the perception of thinness as a beauty standard for women (Kwan et al., 2018). Regarding the age differences, Callan et al. (2015) studied adults, and the results demonstrated that a person's social comparison tendency lowers as the person ages. Social comparison and talking aloud about it may be frowned upon in cultures. The person may be evaluated as arrogant when one talks about their upward comparison evaluation and may be assessed as someone having low self-confidence when talking about downward comparison evaluation. This situation may result in more covert social comparison behaviors among people who fear negative evaluation. The differences between ages may be explained from this perspective. Moreover, in his review, Wheeler (2000) stated that depressive people are more sensitive to social comparison and tend to make upward comparisons. He also emphasized that people with high self-esteem tend to make downward social comparisons. Similarly, Krizan and Bushman (2011) studied narcissists (those with an unhealthy high self-esteem level). They found that narcissists' frequency of making social comparisons is higher than others' and tend to make downward comparisons rather than upward ones.

Recently, the social comparison was also studied in neuroscience. For instance, Dvash et al. (2010) conducted two experiments with the help of fMRI. They scanned participants' brains when they lost or won in an interactive game of chance. Their findings revealed that participants evaluated their loss as a win if the putative player lost more money and vice versa, and it was observed in brain imaging that the reward center was activated in the downward comparison. In contrast, envy emotions were expressed in the upward comparison. Similarly, scholars reported that a person's brain processing of a reward depends on the social comparison (Fliessbach et al., 2007). From this viewpoint, it can be said that people make social comparisons in everyday life since they are urged to evaluate themselves when there are no objective standards. Based on their evaluation, they may experience negative or positive feelings according to their reward center activation.

People assess themselves, particularly when discovering what others think and do (Lee, 2014). As a result of the new world technological improvement, social media platforms are one of the places people see others. Therefore, even though early research on social comparison was in interpersonal and group process context, the research area recently evolved to online social comparison through SNS.

2.8. Research on Social Comparison and Motherhood on SNSs

In today's world, social network sites (SNSs) are one of the sources that fulfill a person's need for interpersonal contact (Verduyn et al., 2020). For instance, it was found that people use SNSs to stay in touch with their families and friends and to obtain support on various subjects (Siddiqui & Singh, 2016). However, it was also discovered that using SNSs negatively correlates with a person's mood (Coyne et al., 2017; Sagioglou & Greitemeyer, 2014). Scholars explain this situation with online social comparison since social media is one of the best places where people may find information about other people through images, videos, and other materials (Haferkamp & Krämer, 2011). Research conducted so far on social comparison and SNSs context mainly focused on upward social comparison. According to Walther and Parks (2002), this may result from people's tendency to filter their reality at some point and share their 'the most' or 'the best' moments on the Internet.

A study on college students found that negative social comparison on SNSs correlated with depressive symptoms, and rumination served as a mediator in this correlation

(Feinstein et al., 2013). Another adolescent sample study demonstrated a positive relationship between social comparison on SNSs, feedback seeking, and depressive symptoms. This relationship was moderated by gender and popularity. The tendency to make social comparisons was higher among women students with low popularity (Nesi & Prinstein, 2015). In addition, Instagram usage frequency was related to depressive symptoms, self-esteem, anxiety, and body dissatisfaction among women, and these relationships were mediated by social comparison orientation (Sherlock & Wagstaff, 2019). Gender issues may help explain this sex difference since as mentioned before, women experience pressure to be beautiful and thin in real life and SNSs (Ando et al., 2021; Mckay et al., 2018). However, it should also be noted that Feinstein et al. (2013) claimed that the risk of experiencing adverse outcomes of social network experience is about usage quality, not frequency.

Social comparison on SNSs may be made in various domains among women, such as physical appearance, career, and life path. When a woman gives birth, motherhood becomes another domain for social comparison (Tosun et al., 2020). Moujaes and Verrier (2020) considered the idealized pictures on the SNSs about motherhood and investigated the relationship between postnatal anxiety and Instagram usage among mothers of preschool-aged children. Their findings indicated a positive relationship between engaging with Instamums and anxiety. Additionally, social comparison orientation and self-esteem were moderators in that association. Therefore, it can be said that promoting mothers' self-esteem and awareness about social media usage during the postnatal period may help to reduce undesirable outcomes of online social comparison.

Germic et al. (2021) conducted experimental research with mothers and aimed to understand the effect of Instamums' content on mothers' perceived parenting self-efficacy beliefs. Even though their hypothesis that exposing Instamum and ideal motherhood images causes low perceived parenting self-efficacy was not supported, they found that parents trying to find parenting information online had lower parenting self-efficacy. Similarly, Ouvrein (2022) studied the relationship between engagement with Instamums, comparing oneself to them, and perceived parenting self-efficacy among mothers and primigravida. She found that engagement with those profiles is helpful and related to higher perceived parenting self-efficacy among primigravida, while a negative correlation between exposure to those profiles and parenting self-

efficacy was found for the mothers. Additionally, a negative association was found between social comparison to those profiles and perceived parenting self-efficacy for mothers. Furthermore, Kirkpatrick and Lee (2022) conducted an experimental study with twenty mothers with young children to understand whether idealized motherhood posts and portrays on Instagram were related to maternal well-being. Their results indicated that idealized portrays of motherhood on Instagram caused an increase in the level of envy and anxiety. Regardless of the owner of the Instagram account (Instamums or everyday mother), this situation remained the same. Additionally, mothers made more social comparisons and perceived more similarity for the posts that included non-idealized images of motherhood. When these findings were evaluated together, it could be suggested that SNSs and parenting self-efficacy are affected by each other.

There are also contrary findings about the effect of SNSs usage among mothers. For instance, in a qualitative study, mothers evaluated SNSs as an emotional and social support source (Nolan et al., 2015). Similarly, Zirakbash et al. (2023) discussed that digital technologies positively impact mothering experiences and empower vulnerable women by increasing social support sources. Therefore, it may be concluded that SNSs usage among mothers and its results should be explored from different perspectives to understand which variables lead to this difference.

2.9. Research on Social Comparison and Motherhood in SNSs in Türkiye

In Turkish literature, although there are some studies on social comparison, limited studies have evaluated social comparison from a SNSs perspective.

Dündar and Tufan (2022) stated that even though the upward comparison was higher than the downward comparison on SNSs, no relationship was found between social media usage frequency and social comparison level. On Instagram, the comparison topic was detected as wealth, while it was found to be success on Twitter. Even though social comparison tendency was higher in the real world than on online platforms, it was higher on Instagram than on Twitter. Moreover, Büyükmumcu and Ceyhan (2019) studied university students' social comparison tendencies. They found that users tend to make more upward comparisons and feel assimilative emotions (e.g., hope, inspiration) more than contrast emotions (e.g., hostility, jealousy). Because it was qualitative research using face-to-face semi-structured interviews, it may be said that

it was hard for participants to state negative emotions they may feel because of social desirability urges. For instance, Asıcı (2022) also studied university students and claimed that upward social comparison was associated with increased depression and stress levels. In addition, she stated that an increase in anxiety level is related to upward social comparison if the comparison target is acquaintances. Another study was conducted with university students by Kaşdarma (2016) about social comparison with acquaintances on SNSs. It was found that social comparison predicted negative feelings after upward social comparison, and those feelings predicted a decrease in life satisfaction and an increase in depression levels. In a similar vein, İçağası (2022) studied adults and found a significant relationship between social comparison and social anxiety. Cognitive distortions and dysfunctional social self-beliefs were mediators in this relationship. Another study found a positive correlation between social comparison tendency and emotional efficacy among male adolescents (Kaya & Savaşlı, 2020). From these findings, it may be claimed that the adverse effects of online social comparison outweigh its positive effects. If an individual is in a sensitive period, these negative experiences may aggravate the outcomes.

The postpartum period is one of the most sensitive periods of a woman's life since the motherhood role brings lots of ups and downs. Similarly, it is claimed that one of the vulnerable populations using social media is new mothers (de Los Santos et al., 2019). Therefore, scholars also examined the mother sample to clarify their social media usage and social comparison behaviors. For instance, Bayram (2022) studied mothers to understand if there is a relationship between mothers' depression levels, parenting stress, and acquisitions' post frequency on SNSs. Results indicated a positive relationship mediated by social comparison orientation and perfectionism. Furthermore, Tosun et al. (2020) investigated mothers' emotions after downward and upward comparisons on SNSs. Researchers found that mothers felt assimilative and contrasting emotions simultaneously, and some mothers refused that they are affected emotionally because of the comparison they made on SNSs.

As can be understood from the literature, the social comparison topic needs to be studied more regarding how mothers are affected by the interaction on SNSs in Turkish literature because it was found that Instamums significantly impact mothers on the topics such as mothers' choice of delivery method, emotional bond between mother and infant, child education, and adoption of culturally constructed current motherhood

expectations (Aktan & Kayış, 2018). Similarly, Ergül and Yıldız (2021) conducted a content analysis of five Instagram mothers' accounts in Türkiye. Their findings indicated that mothers in the postpartum period highly value what those Instamums share. Indeed, it was demonstrated that mothers with babies between 6-24 months searched for information about baby feeding and trusted the information they found on the SNSs (Karakul & Doğan, 2021). On the other hand, the information on SNSs should be investigated to understand whether it is scientifically proofed or based on personal experiences (Ulusoy & Bostancı, 2014). However, Erdoğan et al.'s (2022) study demonstrated that mothers do not search for content creators to understand if they are an expert in their content. From this viewpoint, since the information and content on Instamum profiles have been highly relied on without questioning their expertise, mothers without additional support and prior experience in caregiving may practice the advice those profiles give. Because most Instamum account owners are not experts on parenting or child development, practicing these pieces of advice may also result in some negativities for the child.

Mothering includes two different models, which are gender-talented and conscious collaboration roles (Cowdery & Knudson-Martin, 2005). Mothers with gendered talent roles assume they are inherently talented and knowledgeable about motherhood and caregiving more than fathers. In contrast, mothers with conscious collaboration role perception emphasize including fathers and collaborating with them in the parenting process. By referring to Cowdery and Knudson-Martin's (2005) model, Gül-Ünlü (2019) studied mothers, and her results demonstrated that mothers in conscious collaboration about their motherhood role used social media more actively and effectively than women who adopted a gendered-talent role. Additionally, mothers' social media usage practices changed according to their child's ages. Mothers with young children used social media for their children's entertainment, while mothers with older-aged children used it to find information about their motherhood roles. Furthermore, İşözen and Özkan (2021) studied whether motherhood identity and attitudes are associated with social media usage frequency and purposes. They found that mothers using social media for entertainment evaluated themselves as successful and good mothers, while mothers using social media to understand and know others evaluated themselves as reluctant mothers. In addition, the second group's efficacious mother scores were lower than the first group. Social media usage frequency was

negatively correlated to positive motherhood perception. However, some findings state that searching for information on digital platforms impacts parenting stress positively, and scholars explained this situation by evaluating those platforms as social support sources (Karaca-Koç & Paslı, 2019). As a result, considering the studies conducted so far, even though SNSs can be used as social support source, it may be valuable to increase awareness about SNSs, the Internet use and support mothers' digital literacy.

CHAPTER 3

METHOD

This chapter covers the methodological dimensions of the study, which are research design, participants and sampling, data collection instruments, data collection procedures, description of study variables, data analyses, and limitations.

3.1. Research Design

It is a quantitative study with a correlational design that helps to understand whether there is a relationship between two or more variables without direct influence on each other (Fraenkel et al., 2012). The predictor variable was online social comparison, and the outcome variable was parenting self-efficacy while perceived social support was the mediator between these variables.

3.2. Participants and Sampling

The sample of this study included mothers having at least one child at preschool age, using social media, and living in Türkiye during the data collection process. The exclusion criterion was having a child with special needs. Since random sampling is impossible for all mothers who meet participation criteria, participants were recruited with convenience sampling. Seven hundred ninety-three participants remained after the data screening process, and the final analysis was conducted with those participants.

As can be checked from Table 1, the age of the participants ranged between 23 and 47 (M=33.91, SD=3.77). Ninety-six-point one percent of the mothers were married (n=762), and 3.9 % (n=31) were single. Sixty-nine-point nine percent of the participants have an undergraduate degree (n=554), 21.1 % of them have a graduate degree (n=167), and 9.1 % have a high school or lower degree (n=72). When employment status was examined, 59.3 % of the participants had full-time jobs (n=470), 8.8 % of them were part-time employed (n=70), and 31.9 % were unemployed

(n = 253). In terms of income level, 9.2 % had low income (n = 73), 56.6 % had middle income (n = 449), 31.4 % had mid to high-income (n = 249), and 2.8 % had high-income (n = 22). Regarding the number of children, 58.5 % had one child (n = 464), 36.8 % had two children (n = 292), and 4.2 % had more than two children (n = 37). The daily duration on the Internet that participants spent every day ranged from one to ten hours (M = 2.50, SD = 1.29). It can be said that the participants comprised married, working, well-educated, mid-income, and first-time mothers.

Table 1Demographic Characteristics of the Participants (N = 793)

		n	%
Marital status	Single	31	3.9
	Married	762	96.1
	20-30	141	17.8
Age	31-40	621	78.3
	41-47	31	3.9
	High school and lower	72	9
Education level	Undergraduate	554	69.9
	Graduate	167	21.1
	Unemployed	253	31.9
Employment status	Part-time employed	70	8.8
	Employed	470	59.3
	Low	73	9.2
Income level	Middle	449	56.6
	Middle to high	249	31.4
	High	22	2.8
	One	464	58.5
Number of children	Two	292	36.8
	More than two	37	4.7
Duration on the	1-3 hours	651	83.6
Internet	4-6 hours	133	15.3
	7-10 hours	9	1.1

3.3. Data Collection Instruments

Participants completed four instruments for this study. These were demographic information form, three reworded items from Iowa Netherlands Comparison Orientation Scale (INCOM), the Multidimensional Perceived Social Support Scale (MPSS), and the Perceived Parenting Self-Efficacy Scale (PPSE).

3.3.1. Demographic Information Form

The researcher prepared the demographic information form to describe the study sample. It includes questions about marital status, age, education level, employment status, income level, the number of children, the name of social media platforms, the daily duration of social media usage, and whether the child needs special education (see Appendix B).

3.3.2. Iowa Netherlands Comparison Orientation Scale (INCOM)

Gibbons and Buunk (1999) developed Iowa Netherlands Comparison Orientation Scale to assess a person's social comparison tendency. It consists of 11 items and two factors: comparing abilities and opinions. It is a 5-point Likert-type scale, and participants rate their opinions from (1) strongly disagree to (5) strongly agree regarding statements (E.g., 'I always pay much attention to how I do things compared with how others do things'). A higher score corresponded to a higher social comparison orientation. The correlation score of the two factors was established as .79. Cronbach's coefficient alpha score for internal consistency of the original sample was found as .83. It was also investigated at different times, and it ranged between .78 and .85. Test-retest results were also satisfactory. For a three-to-four-week time interval, test-retest results were found as .71, while the result was .60 after a year test-retest result (Gibbons & Buunk, 1999).

Turkish adaptation study of the INCOM was carried out by Teközel (2000). The same factor structure as the original scale emerged: abilities and opinions. Cronbach's alpha score was found as .82 for the whole scale. According to Teközel's study (2000), adaptation study results are satisfactory, and the scale is valid and reliable.

Previous studies in which mothers' online social comparison orientation was studied, reworded items from INCOM were used (e.g., Chae, 2015). In the current study, three items from INCOM were reworded to measure the social comparison orientation of

mothers on SNSs. Sample reworded items were 'What other mothers I see on social media do take my attention so that I can compare my own motherhood experiences'; and 'I compare what I do with what other mothers I see on social media do to understand how good my motherhood is.' In the exploratory factor analyses process, maximum likelihood was used with the direct oblimin rotation method, demonstrating a unidimensional construct. The explained variance was %51.46, and items loading ranged between .50 and .82.

The three items in the scale were also confirmed in the results of the confirmatory factor analyses which was conducted in Mplus 7. The confirmatory factor analyses yielded an excellent model fit with CFI and TLI values of 1.00, RMSEA of 0, SRMR value of 0, and a $\chi 2$ value of 0, indicating a perfect fit (Hu & Bentler, 1999). In order to ensure the reliability and validity of the analyses, the composite reliability (CR) and average variance extracted (AVE) were computed. The CR value of 0.76 was found to be acceptable (Hair et al., 2010), indicating good reliability of the scale. Additionally, the AVE value of 0.52 was also found to be acceptable (Hair et al., 2010), indicating good convergent validity of the scale. In addition, Cronbach's alpha coefficient score of reworded three items of INCOM was calculated as .74 (see Appendix C).

3.3.3. Multidimensional Scale of Perceived Social Support (MSPSS)

Multidimensional Scale of Perceived Social Support (MSPSS) was developed by Zimet et al. (1988) to measure perceived social support adequacy from different support sources. MSPSS includes 12 items that are rated on a 7-point rating scale. Three dimensions have been identified as social support sources: family, friends, and significant others. For each subscale, there are four statements. Participants rate their opinion regarding statements (E.g., 'There is a person with whom I can share my joys and sorrows') from (1) strongly disagree to (7) strongly agree. The higher score corresponded to a higher perceived social support. The Cronbach's alpha coefficients for the family, friends, and significant other were .87, .85, and .91, respectively. The total reliability of the instrument was found as .85 (Zimet et al., 1988). Since the study was conducted with only university students, the scale's validity for different subject groups has been proved with another study (Zimet et al., 1990). The factorial structure, internal validity, and subscale validity of MPSS stayed robust in that study.

The Turkish adaptation study of MSPSS was initially conducted by Eker and Arkar (1995). According to researchers, the adapted scale's validity and reliability scores were acceptable. Eker et al. (2001) revised the MSPSS form by specifying the 'significant others' term in parenthesis and conducted another study to prove the generalizability of the factorial structure. Results indicated good internal consistency and the same factorial structure as the first one. For the whole scale, Cronbach's alpha coefficient was .89, while for family, friends, and significant others were .85, .88, and .92, respectively. The higher score represented the higher perceived social support. Duru (2007) has conducted an additional study to Eker et al.'s (2001). Exploratory and confirmatory factor analyses of the MSPSS were done for the Turkish university student sample. The factorial structure confirmed the original scale. The internal consistency coefficient score was found as .87 for the whole scale, whereas family, friends, and significant other scores were .85, .88, and .90, respectively (Duru, 2007). Eker et al. (2001) stated that adapted MSPSS is a valid and reliable measure of perceived social support.

In order to understand the fitness of the factorial structure of the scale with the sample of this study, confirmatory factor analysis was conducted. The initial model fit indices for the 12 items unidimensional structure of the scale were CFI = .93, TLI = .91, χ 2 = 494.44, χ 2/df = 9.69, RMSEA = 0.105, and SRMR = 0.05, indicating acceptable fit (CFI and TLI) but with the errors of ε 11- ε 9 and ε 2- ε 1 paired with each other. After allowing these errors to correlate, the model fit indices improved to CFI = .97, TLI = .96, χ 2 = 266.07, χ 2/df = 5.43, RMSEA = 0.075, and SRMR = 0.039. Hu and Bentler (1999) reported that an RMSEA value below 0.8 demonstrates a good fit. Thus, CFA analysis supported the scale's unidimensional structure. Lastly, in the current study, Cronbach's alpha coefficient score on the scale was found as .91 (see Appendix D).

3.3.4. Perceived Parenting Self-Efficacy Scale (PPSE)

The Perceived Parenting Self-Efficacy Scale (PPSE) was developed by Caprara et al. (2004) in order to assess parents' perceptions of their capabilities in their parenting roles. It is a unidimensional scale including 12 items rated on a 7-point scale ranging from (1) highly incapable to (7) highly capable. A higher score corresponded to higher self-efficacy. Items were about the capability of supporting their children for self-reliance, having tasteful time with them, keeping open communication, managing new

challenges, and setting healthy boundaries (e.g., the capability to help your son/daughter cope with problems with others). Cronbach's alpha coefficient and test-retest scores were .92 and .94, respectively.

Demir and Gündüz (2014) conducted an adaptation study of PPSE among Turkish mothers. After the exploratory factor analysis for the implemented sample, one item was excluded from the scale. Their analysis showed that the adapted scale was unidimensional with 11 items. Cronbach's coefficient alpha was found as .92. A general self-efficacy scale was used for criterion validity. The correlation between the two scales was found as .78. Test-retest studies were conducted with two weeks intervals. The reliability score was found as .94. According to Demir and Gündüz (2014), the Perceived Parenting Self-Efficacy scale is valid and reliable for their sample.

Confirmatory factor analysis of PPSE demonstrated that CFI = .90, TLI = .88, χ 2 = 260.88, χ 2/df = 5.93, RMSEA = 0.079, and SRMR = 0.05. Although the fit indices were close to critical points, they were acceptable and suggested an adequate fit to the data. In the present study, Cronbach's alpha was calculated .87 (see Appendix E).

3.4. Data Collection Procedure

Before data collection, METU Human Subjects Ethics Committee approved the current study (see Appendix A). To collect, the researcher prepared a survey link including informed consent and all scales. The survey started with an informed consent form that included information about the study and assurance regarding the confidentiality and anonymity of the study. An agreement button was placed at the end of the page for voluntary participation. Participants who agreed to participate in the study were allowed to continue the survey. Data were collected online via social media platforms, and the snowball technique was utilized. Firstly, the survey link was published on the researcher's Instagram account with announcement text explaining the criteria for being a participant and support requests from followers to reach more mothers. Secondly, the survey link was also shared via WhatsApp with the mothers who met the participation criteria and were known by the researcher. Additionally, Instagram accounts with many followers were reached via direct message or e-mail, and the link was requested to be shared. Data were collected between August 2022 and September 2022.

3.5. Description of the Variables

Social comparison: The present study refers to social comparison as summed scores of three reworded items from INCOM to explain mothers' social comparison orientation on social media.

Perceived social support: The current study defines perceived social support as summed scores from the Multidimensional Scale of Perceived Social Support.

Parenting self-efficacy: In this study, it refers to summed scores obtained from the Perceived Parenting Self-Efficacy Scale.

3.6. Data Analyses

First of all, categoric variables were converted to numeric values. The total scores of each scale were computed. Outliers, assumptions of normality, homoscedasticity, linearity, independence of errors, and multicollinearity were checked before conducting further required analyses.

The Mplus 7 program was used for confirmatory factor analyses of the scales. In factor analyses, maximum likelihood estimation and 5000 bootstrapping methods were utilized as estimation methods. In addition, Cronbach's alpha coefficients were calculated for the reliability analyses of the scales, and descriptive statistics were conducted in IBM SPSS 25 package program and presented to identify the sample's characteristics better. Pearson correlation scores were checked to understand relationships between variables. Furthermore, IBM SPSS 25 package program and the PROCESS macro 4.0 were used for mediation model analyses. Lastly, the mediation model was tested with the help of the 5000-bootstrapping method.

3.7. Limitations of the Study

This study has several limitations. The sampling method may be the first limitation of this study. In this research, the convenience sampling method was utilized. Even though the sample size was large, the exact representativeness of the population cannot be reached with convenience sampling. This situation may reduce the external validity and generalizability of this research. In addition, the study subjects were mainly married, well-educated, and working mothers with middle-income. Therefore, the representativeness of the results is limited to the study participants' profiles.

Moreover, data have been collected online. Even though it helps to reduce data collector characteristics bias and ensure anonymity for participants, it still has some drawbacks. For instance, participation criteria were emphasized in the data collection process, but it cannot be ensured that the participants strictly comply with them.

Also, since all scales were self-report scales, the result of that study may be affected by the participants' social desirability urges. Furthermore, since the study has a correlational design, it does not point to the cause-effect relationship between variables (Fraenkel et al., 2012). Finally, even though confounding variables; for example, having a child with special needs, were tried to keep constant, there may still be other confounding covariables (e.g., enactive mastery experiences) that may affect the study results.

CHAPTER 4

RESULTS

4.1. Preliminary Analyses

Following data collection, the data underwent screening to exclude participants who did not meet the study's participant criteria (e.g., not having a child of preschool age, having a child with special needs, not using social media) and to determine if there were any patterns. In this step, 56 cases were deleted. Additionally, missing data were identified, and participants with more than 5% missing values on the scales were excluded from the data set (N = 21). Seven hundred ninety-three participants remained after the data screening process. According to Fritz and MacKinnon (2007), the minimum sample size is 400 in order to reach 0.8 power in bias-corrected bootstrap. In the current study, the sample size was beyond the required size and was decided as adequate for that study. Lastly, following the identification of multivariate outliers using Mahalanobis distance, the absence of any outliers was confirmed with a critical value of 13.82, which was not exceeded at the two degrees of freedom level (Tabachnick & Fidell, 2013). Therefore, it was concluded that there was no outlier in the dataset.

4.2. Descriptive Statistics of the Study Variables

In Table 2, descriptive statistics of the study variables are presented. As can be checked from the table, in the present study, scores obtained from Perceived Parenting Self-Efficacy Scale ranged between 15 and 77 with a mean of 55.37 (SD = 8.57), while Multidimensional Perceived Social Support Scale scores ranged between 12 and 84 with a mean of 55.78 (SD = 16.40). Lastly, scores from reworded three items of the Iowa-Netherlands Comparison Orientation Measure scale ranged between 3 and 15 with a mean of 7.28 (SD = 2.59).

Table 2Descriptives of the Study Variables (N = 793)

Variable	min.	max.	M	SD
PPSE	11	77	55.37	8.57
MPSS	12	84	55.78	16.40
INCOM	3	15	7.28	2.59

Note: PPSE: Perceived Parenting Self-Efficacy, MPSS: Multidimensional Perceived Social Support, INCOM: Iowa Netherland Comparison Orientation Measurement

4.3. Assumption Checks for Mediation Analyses

The normality assumption was tested by examining the histogram and normal probability - probability (P-P) plot. As depicted in Figure 2, the histogram of the residuals displayed a bell-shaped curve and a slight positive skewness that can be observed. Additionally, the normality assumption was assessed by inspecting the residuals in the P-P plot, shown in Figure 3. The P-P plot demonstrated that while there is a very slight deviation from the line, it was not a substantial deviation to consider.

Figure 2 *Histogram of standardized residuals*

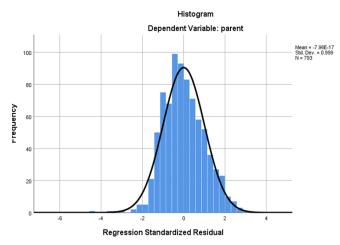
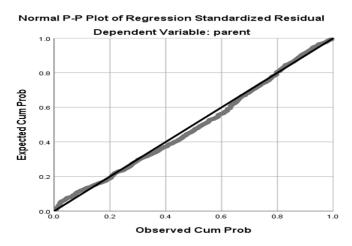


Figure 3Normal P-P plot of normality of residuals



Univariate normality was examined by checking the skewness and kurtosis values of the study variables, presented in Table 3. As can be seen from the table, skewness and kurtosis values were in the acceptable range. When the skewness and kurtosis values are examined, it is seen that they are between -1 and +1, and it can be said that the data has the assumption of normal distribution. (Tabachnick & Fidell, 2013).

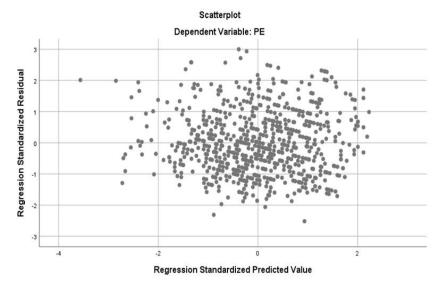
Table 3Skewness and Kurtosis Values of Study Variables

Variables	Skewness	Kurtosis
PPSE	.08	.59
MPSS	27	49
INCOM	.38	35

^{*}Note: PPSE: Perceived Parenting Self-Efficacy; MPSS: Multidimensional Perceived Social Support; INCOM: Iowa Netherland Comparison Orientation Measurement

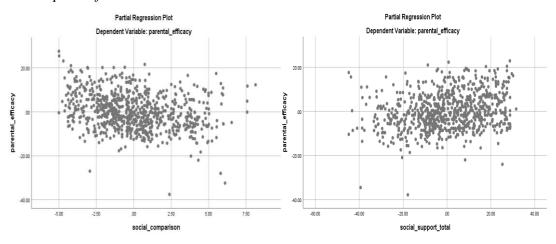
Regarding homoscedasticity, the regression residuals are tested by scatter plotting the analyzed versus predicted values. As shown in Figure 4, the residuals are evenly spread across the plot, so the assumption of equivariance is satisfied. Tabachnick and Fidell (2013) stated that a slight variance could be ignored even without heterogeneous residuals.

Figure 4The scatterplot of regression standardized predicted values



Partial regression scatterplots were examined for linearity. Scatterplots of residuals demonstrate a linear relationship among observed scores on parenting self-efficacy and values of social comparison and social support (see Figure 5).

Figure 5
Scatterplots of residuals



The Durbin-Watson statistic was utilized to check the assumption of independence of errors. The Durbin-Watson coefficient should be between 1.50 and 2.50 (Tabachnick & Fidell, 2013), and the Durbin-Watson coefficient of 1.92 is in the acceptable range. Thus, the coefficient indicated that the independence of errors assumption was met.

Correlation analyses were implemented to understand the relationship between online social comparison, perceived social support, and parenting self-efficacy, and the results were presented in Table 4. The results revealed a significant and negative

correlation between online social comparison and perceived social support (r = -0.11, p < .01). Moreover, a significant and negative correlation was found between online social comparison and parenting self-efficacy (r = -0.28; p < .01). Lastly, a significant and positive correlation was observed between perceived social support and parenting self-efficacy (r = 0.27; p < .01). Notably, the correlation between parenting self-efficacy and online social comparison was found to be the highest among the variables. Thus, these findings provided support for conducting regression analyses. Based on these outcomes, analyzing the mediating role model is feasible.

 Table 4

 Pearson Correlation Coefficients (r) for Interrelationships Between Variables

Variables	1	2	3
1. Online Social Comparison	-		
2. Perceived Social Support	-0.11**	-	
3. Perceived Parenting Self-efficacy	-0.28**	0.27**	-

^{**}p < .01

To avoid multicollinearity between the causal variables and the mediator, the correlation table was examined. One of the predictor variables should be removed if the correlation between the predictor variables is higher than .90 since multicollinearity can cause uncertainty and lead to overlooked mediation relationships (Tabachnick & Fidell, 2013). Results of the present study demonstrated that the relationship between the predictor variables (online social comparison and perceived social support) did not exceed the recommended threshold (see Table 4). Therefore, there was no multicollinearity between the predictor variable (online social comparison) and the mediator variable (perceived social support) in this study, and this assumption was also satisfied.

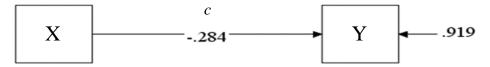
4.4. Main Analyses

The mediation analysis results examining whether perceived social support had a significant mediating role in the relationship between online social comparison and parenting self-efficacy were presented below. First, the model in which online social

comparison predicted parenting self-efficacy was shown in model A (see Figure 6). As can be seen, the standard estimate value for the relationship between online social comparison and parenting self-efficacy was found to be -0.284.

Figure 6

Model A: Total effect of online social comparison on parenting self-efficacy



Online Social Comparison

Parenting Self-efficacy

The results of the path analyses of the model of the relationship between online social comparison and parenting self-efficacy are presented in Table 5.

Table 5The Results of Path Analyses of Model A

Predictor variable	Outcome Variable			
	Parenting S	Parenting Self-Efficacy		
Online Social Comparison	β	t	p	
	-0.28	-8.33	.00	
$R^2 = 0.08$				

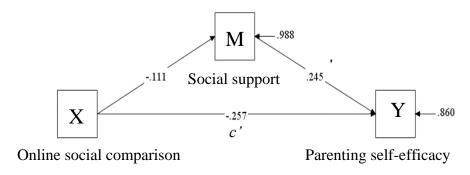
^{**}p < .01

The table shows that the online social comparison variable significantly predicted parenting self-efficacy levels negatively ($\beta = -0.28$, t = -8.33; p < .01). In addition, online social comparison accounted for 8% of the variance in parenting self-efficacy levels.

When the perceived social support variable was added as a mediator variable to the model, the following model B and coefficients were obtained (see Figure 7).

Figure 7

Model B: Simple mediation model



According to model B, online social comparison levels significantly and negatively predict parenting self-efficacy levels ($\beta = -.26$, p < .01). Online social comparison levels also significantly and negatively predict perceived social support levels ($\beta = -.11$, p < .01). Lastly, perceived social support is a statistically significant positive predictor of parenting self-efficacy ($\beta = .25$, p < .01).

In Model A and Model B, it can be seen that the change in the path coefficient leading from online social comparison and parenting self-efficacy, from -.284 to -.257, is partly due to the partial mediating role of the perceived social support variable. Overall, the perceived social support variable is seen as a partial mediator in the relationship between online social comparison and parenting self-efficacy.

Table 6Standardized Total, Direct and Indirect Effects for Mediation Analyses

Variables	Parenting Self-efficacy			
	Direct – 95%CI	Indirect– 95%CI	Total–95%CI	
Social Comparison	26**[32,20]	03**[04,01]	29**[34,23]	

^{**}*p* < .01

The current study analyzed the mediating role of perceived social support on the relationship between online social comparison and parenting self-efficacy. As can be seen from Table 6, the results revealed a significant indirect effect of online social comparison on parenting self-efficacy ($\beta = -0.03$, p < .01, 95 % CI [-.04, -.01]). In

addition, the direct effect of online social comparison on parenting self-efficacy in the presence of the mediator was found significant ($\beta = -0.26$, p < .01, 95 % CI [-.32, -.20]).

Furthermore, the results in Table 7 show that in Model 1, online social comparison is a significant negative predictor of perceived social support (β = 0.70, p < .01) and the variance of the Model 1 is % 01. In Model 2, online social comparison is a significant negative predictor of parenting self-efficacy (β = -0.85, p < .01), while perceived social support is a significant positive predictor of parenting self-efficacy (β = 0.13, p < .01). Also, the variance of the Model 2 is % 14. There is also a significant relationship between online social comparison and parenting self-efficacy and an indirect effect between online social comparison and parenting self-efficacy through the perceived social support variable. Since the direct effect of online social comparison on parenting self-efficacy in the presence of the mediator was found significant, it was understood that perceived social support partially mediated the relationship between online social comparison and parenting self-efficacy.

Table 7Path Analyses Results for the Mediator Model of the Perceived Social Support Variable

Model 1	Variable	(β)	Standardized (β)	S.E.	t	p
Outcome variable: PSS	Constant	60.89		1.73	35.19	.00
variable. 1 55	OSC	-0.70	-0.11	0.22	-3.14	.00
$R^2 = .01; F_{(1,791)} = 9.84; p = .01$						
Model 2	Constant	54.43		1.35	40.24	.00
Outcome variable: PSE	OSC	-0.85	-0.26	0.11	-7.73	.00
variable. I DE	PSS	0.13	0.25	0.02	7.37	.00

 $R^2 = .14$; $F_{(2,790)} = 64.19$; p = .01

^{*}Note: PSS: perceived social support, OSC: online social comparison, PSE: parenting self-efficacy

CHAPTER 5

DISCUSSION

In the last chapter, the study's findings were discussed by referring to previous findings in the literature. Also, this chapter includes implications from the study findings, and future recommendations for future researchers.

5.1. Discussion of the Results

The present study investigated the mediating role of perceived social support in the relationship between online social comparison and parenting self-efficacy. In order to understand this mediating role, a simple mediation analysis was conducted. Initially, correlations between the variables were examined, and results indicated a negative correlation between online social comparison and perceived social support, which aligns with the literature (Coyne et al., 2017; Kirkpatrick & Lee, 2022). One possible explanation for this finding may be the outcomes of social comparison. For instance, social comparison is known to be associated with negative mental health outcomes and anxiety among mothers (Coyne et al., 2017; Moujaes & Verrier, 2020; Kirkpatrick & Lee, 2022). From this viewpoint, a person with depression, anxiety, or contrasting emotions, such as envy and jealousy, may perceive social support as lower than what they receive because of cognitive biases they may have. In addition, as mentioned in the literature, the postpartum period includes isolation at some point, weakening social support ties (Strange et al., 2018). Mothers mostly stay at home during the maternal leave, and the lack of social support sources in that period may lead to looking for support from the SNSs in which perfect motherhood representations are presented (Chae, 2015). In line with this, Coyne et al. (2017) pointed out that mothers do not feel satisfied with the support they receive since, on SNSs, others seem to be getting perfect and seamless support from their sources. Therefore, if sufficient social support is provided for mothers, they may get what they are looking for without exposure to unrealistic content on SNSs.

Secondly, online social comparison and parenting self-efficacy were negatively correlated, consistent with Ouvrein's (2022) results but inconsistent with the experimental study findings of Germic et al. (2021). The importance of vicarious experiences can explain this finding. Social media is one of the sources of vicarious experiences in the modern world. However, motherhood representations on social media put some norms and cultural expectations which are hard to reach for mothers. Thereby, mothers without parenting experiences may feel under pressure to fulfill these expectations and norms. Experience of difficulty in reaching those norms may show itself in the real world as feelings of inadequacy and lower parenting self-efficacy beliefs. The second explanation for this result may be people's tendency to share more positive moments than negative ones on SNSs. Most content creators share their best moments, resulting in a positive bias toward mothers behind the screen (Wegener et al., 2022). It may be another topic to discuss. If motherhood representation on SNSs changes and is shared more realistically, the relationship between parenting self-efficacy and online social comparison may differ.

Additionally, parenting self-efficacy was positively correlated with perceived social support, and this finding was consistent with the literature (Angley et al., 2015; Leahy-Warren et al., 2012). This finding was not surprising since social support is a kind of verbal persuasion and one of the ways to foster parenting self-efficacy beliefs (Bandura, 1997; Gao et al., 2014; Leahy-Warren et al., 2012; Suzuki et al., 2009). New and first-time mothers may benefit from social support while they struggle in their new roles in that transition period. Social support sources are valuable since they promote mothers' parenting self-efficacy beliefs and maternal well-being. As mentioned before, Kim et al.'s (2008) claimed that people from collectivist cultures found it more challenging to ask for social support than people from individualistic cultures. Considering Turkish people's collectivist culture, permanent social support sources should be provided for mothers so they can use them when needed. However, the support content should also answer mothers' needs (Güler & Yalçınkaya Alkar, 2021).

Lastly, perceived social support partly mediated the relationship between online social comparison and parenting self-efficacy, indicating that perceived social support may be the reason for the negative relationship between online social comparison and parenting self-efficacy. However, it should be noted that there may still be other variables that may explain the relationship between online social comparison and

parenting self-efficacy. In that study, when perceived social support scores were low, the relationship between online social comparison and parenting self-efficacy was negatively high. However, when the perceived social support scores were included in this relationship as a mediator, the correlation coefficient between online social comparison and parenting self-efficacy was the lowest. This finding is the most crucial finding of that study since these variables were not studied together in the literature to the best of our knowledge. A possible explanation for this result may be the positive contribution of social support to parenting self-efficacy. It may be claimed that perceived social support increases mothers' parenting self-efficacy beliefs, reducing the risk of making online social comparisons and experiencing adverse outcomes. This finding again highlighted the importance of providing social support for mothers to promote maternal health.

5.2. Implications of the Results for the Practice

The results of the present study may offer implications for mental health workers, social policymakers, and content creators. First, this study demonstrated that social support is vital since it positively correlates with parenting self-efficacy and negatively correlates with online social comparison. Mental health workers may consider leading mother circles to increase mothers' social support. Motherhood should be discussed from various perspectives, but since it is a blessed role, primarily positive aspects of motherhood are open to talk overtly in society. Therefore, mothers may feel under pressure to be the perfect mother to fulfill cultural expectations, norms, and requirements of this role (Henderson et al., 2015). However, it is hard to find a place to honestly share their on-time feelings where they will not feel judged, so these circles may help them in this context. Additionally, mental health workers may benefit from the study findings when they develop family training programs since the findings indicated the importance of increasing mothers' awareness of using SNSs. In the contemporary world, not using SNSs may not be one of the options to reduce adverse outcomes of social comparison. However, SNSs should be used by considering that monetization on SNSs reduces the reality and authenticity of the content (Ouvrein, 2022). Therefore, governmental and nongovernmental organizations may offer digital literacy courses in online platforms to increase societal awareness.

Furthermore, social policymakers should contemplate programs to promote maternal well-being and increase parenting support sources; field research and need assessment should be encouraged. These sources may include psychological support sources and instrumental sources. Additionally, preventive studies should be carried out after the mother and baby are released from the hospital. Mothers' well-being should be followed up to eliminate any risks of negative experiences in the postpartum period. In order to promote parenting self-efficacy beliefs, training may be offered before and after giving birth. Thanks to these training programs, mothers may feel more confident about their parenting skills. In addition, including fathers in these parenting training programs should be considered to increase father involvement in the parenting process and mothers' social support sources.

Moreover, it is known from the literature that mothers mainly use SNSs and search on the Internet for information about parenting practices (Lupton, 2016; Newhouse & Blandford, 2016). If expert guidance is made accessible by social policymakers for every mother after giving birth, it may be thought that mothers' searching for information on the Internet or looking for social support on the Internet behaviors may decrease. Additionally, expert guidance may serve as a social support source for mothers and may increase their parenting self-efficacy beliefs.

The last suggestion may be given to content creators. They should be aware of their effects on the audience and be careful with their contents, specifically if their target audience is mothers. Coyne et al. (2017) reported that realistic content about parenting is rarely found. Therefore, parenting should be presented with all dimensions, not only in real life but also on SNSs.

5.3. Recommendations for Future Research

This study contributes to the literature with its crucial findings about the study variables. However, referring to its limitations, recommendations may be suggested for further research.

First, even though there is a scale for social comparison orientation, a scale that measures online social comparison was not found in the literature. Researchers may consider developing a scale specifically for online social comparison.

Another recommendation may be to improve the methodology of the study. This quantitative study relied on the participants' answers on self-report scales. A qualitative study can be conducted to see mothers' social comparison experiences from a broader perspective, or a mixed method can be used. Additionally, this study emphasizes correlations between variables and does not show cause-and-effect relationships. Designing experimental research may be a good way to see the exact cause-and-effect relationship between variables.

The data collection procedure is another dimension that would be recommended for improvement. For instance, the data from this study were collected with a cross-sectional design. Future researchers may prefer to collect their data with a longitudinal design. The social comparison concept of SNSs, which is a fruitful area, should be studied more in Turkish literature with different samples to increase the reliability of the study findings. Moreover, data was collected online in that study. Collecting data with the paper-pencil method may decrease the risk of violating a participant criterion.

Furthermore, the convenience sampling method was used in the present study, decreasing the sample representation. Future researchers may try different sampling methods to increase the sample representativeness of the population. Other predictor variables (e.g., the number of children) may also increase the explained variance. Future researchers may consider including other variables in their studies. It is also highly recommended to conduct the study by including fathers in the sample and discussing the results by referring to gender roles. Lastly, future studies may keep some variables constant which are not considered in the current study (e.g., previous attendance to parenting programs, number of children etc.).

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APPENDICES

APPROVAL OF THE METU HUMAN SUBJECTS ETHICS COMMITTEE



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20HAZİRAN 2022

Konu: Değerlendirme Sonucu

Gönderen: ODTÜ İnsan Araştırmaları Etik Kurulu (İAEK) İlgi: İnsan Araştırmaları Etik Kurulu Başvurusu

Sayın Prof. Dr. Ayhan DEMİR

Danışmanlığını yürüttüğünüz Aylin ZENCİR'in "Algılanan Sosyal Destek Düzeyinin Online Sosyal Karşılaştırma ve Ebeveyn Öz-yeterliği İlişkisindeki Düzenleyici Rolü" başlıklı araştırması İnsan Araştırmaları Etik Kurulu tarafından uygun görülerek gerekli onay 0376-ODTUIAEK-2022 protokol numarası ile onaylanmıştır.

Bilgilerinize saygılarımla sunarım.

Prof. Dr. Mine MISIRLISOY Başkan

Doç. Dr. İ.Semih AKÇOMAK Dr. Öğretim Üyesi Müge GÜNDÜZ

Üye Üye

Dr. Öğretim Üyesi Şerife SEVİNÇ Dr. Öğretin Dyesi Murat Perit ÇAKIR Üye

Dr. Öğretim Üyesi Süreyya ÖZCAN KABASAKAL Dr. Öğretim Üyesi A. Emre TURGUT Oye

B. DEMOGRAPHIC INFORMATION FORM

DEMOGRAFİK BİLGİ FORMU

Bu formda sizinle ilgili genel bilgiler edinmeyi amaçlayan sorular yer almaktadır. Lütfen maddelere sizin için en uygun olan cevabı veriniz.

1. Medeni durumunuz: □ Evli □ Bekâr
2. Yaşınız:
3. Çalışma durumunuz:
☐ Ev emekçisiyim
☐ Yarı zamanlı çalışıyorum
☐ Tam zamanlı çalışıyorum
4. Kendinizi hangi gelir düzeyinde görüyorsunuz?
□ Alt gelir
□ Orta gelir
☐ Orta-üst gelir
□ Üst gelir
5. Çocuk sayısı:
6. Lütfen çocuk/çocuklarınızın yaşını ay olarak belirtiniz.
7. Kullandığınız sosyal medya platformlarını işaretleyiniz.
□ Instagram
□ Facebook
☐ Twitter
□ TikTok
□ Diğer (Belirtiniz):
8. Sosyal medyada günde ortalama kaç saat geçiriyorsunuz?
9. Çocuğunuzun herhangi bir özel eğitim gereksinimi var mı?
□ Evet □ Hayır

C. SAMPLE ITEMS OF REWORDED ITEMS IOWA-NETHERLAND COMPARISON ORIENTANTION MEASUREMENT

Bu formda anne olarak sosyal medya deneyimlerinize dair sorular yer almaktadır. Soruların herhangi bir doğru veya yanlış bir cevabı yoktur. Lütfen sizin için en uygun olan cevabı işaretleyiniz.

1.	Kendi	annelik	deneyimlerimi	kıyasla	yabilmem	için	sosyal	medyada
ka	rşılaştığ	ım diğer	annelerin neler	yaptıkları	na oldukç	a dikk	at ederii	m.
	Kesinlil	kle katıln	nıyorum					
	Katılmı	yorum						
	Kararsı	zım						
	Katılıyo	orum						
	Kesinlil	kle katılıy	/orum					
2.	Anneli	ğimin n	e kadar iyi o	lduğunu	anlamak	için	sosyal	medyada
ka	rşılaştığ	ım diğer	annelerin neler	yaptıkları	ıyla karşıla	ştırırı	m.	
	Kesinlil	kle katıln	nıyorum					
	Katılmı	yorum						
	Kararsı	zım						
	Katılıyo	orum						
	Kesinlil	kle katılıy	orum/					

D. SAMPLE ITEMS OF MULTIDIMENSIONAL PERCEIVED SOCIAL **SUPPORT SCALE**

ÇOK BOYUTLU ALGILANAN SOSYAL DESTEK ÖLÇEĞI

Asağıda 12 cümle ve her bir cümle altında da cevaplarınızı isaretlemek için 1'den 7 'ye kadar rakamlar verilmiştir. Her cümlede söylenenin sizin için ne kadar çok doğru olduğunu veya olmadığını belirtmek için o cümle altındaki rakamlardan yalnız bir tanesini isaretleyiniz. Bu sekilde 12 cümlenin her birine bir işaret koyarak cevaplarınızı veriniz.

	<u>Lütfen hicbir cümleyi ceva</u>	osiz b	ırakn	nayın	ız. Siz	ce do	ğruya	en y	akın olan rakamı işaretleyiniz.
1.	Ailem (örneğin, annem, baba	m, eş	im, ç	ocuk	larım	, karc	leşler	rim) k	oana yardımcı olmaya çalışır.
	Kesinlikle hayır	1	2	3	4	5	6	7	Kesinlikle evet
2.	İhtiyacım olan duygusal yardı kardeşlerim) alırım.	ım ve	dest	eği a	ilemo	len (ö	irneğ	in, ar	nnem, babam, eşim, çocuklarım
	Kesinlikle hayır	1	2	3	4	5	6	7	Kesinlikle evet
3.	Arkadaşlarım bana gerçekten	yard	lımcı	olma	ya ça	lışırla	ır.		
	Kesinlikle hayır	1	2	3	4	5	6	7	Kesinlikle evet
4.	İşler kötü gittiğinde arkadaşla	arıma	güve	enebi	lirim.				
	Kesinlikle hayır	1	2	3	4	5	6	7	Kesinlikle evet
5.	Ailem ve arkadaşlarım dışında nişanlı, sözlü, akraba, komşu,				cım o	lduğu	ında	yanın	nda olan bir insan (örneğin, flört
	Kesinlikle hayır	1	2	3	4	5	6	7	Kesinlikle evet

E. SAMPLE ITEMS OF PARENTING SELF-EFFICACY SCALE

Ver	eceğiniz cevaplar "Oldukça	1	2	3	4	5	6	7
	ersizim(1) ve Oldukça Yeterliyim(7)"	0	_	Y	•	Y		O
	sında derecelendirilmiştir. Size uygun	1		e		e		1
	en 1-7 arasındaki herhangi bir sütunu	d		t		t		d
_	etleyiniz.	u		e		e		u
,	,	k		r		r		k
		ç		S		1		ç
		a		i		i		a
		Y		Z		y		Y
		e		i		i		e
Oğl	unuz ya da kızınızla ilişkilerinizde	t		m		m		t
aşa	ğıdaki davranışları ne kadar yeterli	e						e
düz	eyde sergileyebiliyorsunuz.	r						r
		S						1
		i						i
		Z						y
		i						i
		m						m
	Başkalarıyla yaşadığı sorunlarla başa							
1	çıkmasında oğlunuza/kızınıza							
	yardım edebilme							
	Çocuğunuzun beklenti ya da talepleri							
	karşılamada yetersiz kaldığınızı							
2	hissettiğinizde ona kendi ayakları							
	üzerinde durabilmesi için destek							
	olabilme							
	Kişisel, ailevi ya da işle ilgili							
3	sorunlarınıza rağmen							
	oğlunuz/kızınızla ilgilenebilme							
	Oğlunuz/kızınız kurallara ya da							
4	verdiği sözlere uymadığında bu							
	durumu tavizsiz idare edebilme							
_	Gerçekçi hedefler belirlemesine ve							
5	bunları başarabilmesine yardımcı							
	olma							

F. TURKISH SUMMARY / TÜRKÇE ÖZET

ANNELERİN EBEVEYNLİK ÖZ YETERLİĞİ VE ÇEVRİMİÇİ SOSYAL KARŞILAŞTIRMA DÜZEYİ ARASINDAKİ İLİŞKİDE ALGILANAN SOSYAL DESTEĞİN ARACI ROLÜ

1. GİRİŞ

Bilgi ve iletişim teknolojilerinin (BİT) insanların günlük yaşamlarına entegre edilmesiyle birlikte BİT, hamileliğin ilk günlerinden itibaren kadınların anneliğe giden yolculuklarının çoğuna eşlik etmektedir. Çevrimiçi ortamda, kadınların hamilelik dönemleri ile ilgili bilgileri bulabilecekleri ve deneyimlerini paylaşabilecekleri birçok uygulama, platform ve sosyal ağ sitesi (SAS) bulunmaktadır (Zhu vd., 2019). Ancak sosyal medyanın rolü hamilelik süreci ile sınırlı değildir. Doğum sonrası süreç anneler için belirsizlik ve izolasyon içeren, duygusal olarak zorlayıcı bir zaman dilimi olabilmektedir (Strange vd., 2018). Newhouse ve Blandford'a (2016) göre bu dönemde sosyal medya platformu olan Facebook, kadınlar için kritik destek ve bilgi kaynağı işlevi görmektedir. Oto ve diğerlerine (2022) göre de sosyal medya, annelerin aile ve arkadaşlarla iletişimde kalmasını kolaylaştırdığı için değerlidir.

Bununla birlikte, SAS'lerin anneler için avantajları olduğu kadar dezavantajları da tartışmaya açıktır; çünkü sosyal medyanın, günümüzde artık annelik konularının tartışıldığı ve yeniden inşa edildiği bir yer haline geldiği bilinmektedir (Orton-Johnson, 2017). Bazı bulgular SAS'lerin sosyal destek kaynağı olarak hizmet ettiğini gösterse de özellikle annelikle ilgili kültürel beklentileri karşılamadıklarını düşündüklerinde, bu platformlar annelerin sosyal karşılaştırma yaptıkları bir yer haline dönüşebilmektedir (Coyne vd., 2017). Örneğin Douglas ve Michaels (2005) internetteki ünlü anne profillerindeki içeriklerin, 'mükemmel anne', 'mükemmel eş' ve 'mükemmel kadın' algısını teşvik ettiklerinden anneler için suçluluk kaynağı oluşturduğuna işaret etmektedir. Chae'nin (2015) alfa-anne olarak tanımladığı bu annelere SAS'de sürekli olarak maruz kalmak, Wegener ve diğerlerine göre (2022), ekranın arkasındaki kadınlarda anneliğe dair gerçekdışı bir beklenti yaratabilmektedir.

Bunun sebebi, alfa-anne içeriklerinin aksine, annelerin fiziksel görünüm değişikliği, adaptasyon süreci, doğum sonrası depresyon olasılığı, belirsizlik, annelik rolünü anlama süreci, artan iş yükü ve mücadele deneyimi yaşaması olabilir.

Burada da örneklendiği gibi, gerçeklik ve SAS'lerde gösterilenler arasındaki tutarsızlık ve bunların etkileri araştırmacıların ilgisini çekmiş ve SAS'de sosyal karşılaştırma konusu çalışılmaya başlanmıştır. Kirkpatrick ve Lee (2022), insanların SAS'lerde kendilerini gerçek benliklerinden daha iyi sunma eğiliminde oldukları için normal benliklerini başkalarının en iyi benlikleriyle karşılaştırdıklarını öne sürmüştür. Dolayısıyla, sosyal karşılaştırma yoluyla annelik deneyimleri ve uygulamaları hakkında onaylanmış hissetmek mümkün olsa da, yetersiz, yalnız, tükenmiş ve suçlu hissetmek de oldukça olasıdır.

Sosyal karşılaştırma yapma eğiliminin nedeni Festinger'in (1954) sosyal karşılaştırma kuramı ile açıklanabilir. Festinger (1954), objektif kriterler olmadığında, kişinin kendisini değerlendirmek için bilgi aradığını ve başkalarını gözlemlediğini ileri sürmüştür. 'İyi annelik' için nesnel değerlendirme standartları olmadığından, anneler sıklıkla bir norm olarak görülen şeyi kabul etme eğilimindedir. Örneğin bu normlardan biri, annelerin tüm zamanlarını, kaynaklarını ve paralarını çocuğa adamalarını, çocuk gelişimi konusunda son derece bilgili olmalarını ve çocuk yetiştirmeden birincil derecede sorumlu olmalarını gerektiren yoğun annelik ideolojisidir (Chae, 2015; Hays, 1996). Bu ideoloji, İnstagram gibi sosyal medya platformlarında hızla ün kazanan annelerin paylaşımları ile desteklenmekte ve güçlendirilmektedir. Ancak, bu ideolojinin belirlediği kriterlere ulaşmak, anneler için oldukça zorlu ve ulaşılması neredeyse imkansızdır. Bundan yola çıkarak sosyal medyadaki annelerle yapılan sosyal karşılaştırmanın, annelerin kendilerini yetersiz hissetmelerine neden olabileceği çıkarımında bulunulabilir.

Özellikle ilk kez anne olan kadınların, yeni rollerini anlamaya çalışırken, SAS'lerde çoğunlukla mükemmel annelik görüntülerini, içeriklerini ve paylaşımlarını gözlemlemeleri, öğrenme sürecinde dolaylı deneyimlerin (gözlem ve modelleme) önemine atıfta bulunan sosyal bilişsel kuramı hatırlatmaktadır (Amaro vd., 2019; Bandura, 1997). Dolaylı deneyimler, 'kişinin belirli kazanımları elde etmek için gerekli eylemleri organize etme ve yürütme yeteneklerine olan inançlarına' işaret eden öz yeterlik inançlarının geliştirilmesinin kaynaklarından biridir (Bandura, 1997; s.3).

Bandura (2001) kitle iletişim araçlarının yeni davranışlar öğretebileceğini, davranışları değiştirebileceğini ve bir kişinin yeterlik inançlarını yeniden şekillendirebileceğini iddia etmiştir. Bu açıdan bakıldığında, mükemmel annelik temsillerine çevrimiçi olarak maruz kalmak ve bu medya içeriklerini düzenli olarak gözlemlemek annelerin ebeveynlik öz yeterlik (EÖY) algısına katkıda bulunabilmektedir (Celada, 2010). EÖY, ebeveynlik uygulamalarını, çocuk gelişimini ve iyilik halini etkilediği için ebeveynliğin önemli bir bileşeni olan bilişsel bir yapıdır (Coleman ve Karraker, 2000). Yapılan çalışmalar EÖY'nin, ebeveyn memnuniyetini etkileyen bir faktör (Gordo vd., 2018; Jeong ve Kim, 2016), ebeveynlik deneyimlerine uyum sağlamada kolaylaştırıcı bir faktör (Biehle ve Mickelson, 2011) ve doğum sonrası depresyona karşı koruyucu bir faktör (Abdollahi vd., 2016; Giallo vd., 2014) olduğunu ortaya koymuştur. Dolayısıyla EÖY'nin ebeveynliğin ve ebeveyn ruh sağlığının önemli bir parçası olduğu açıktır.

EÖY sosyal medya ve sosyal karşılaştırma bağlamlarında da çalışılmıştır. Örneğin, Ouvrein (2022) anneler arasında algılanan EÖY ile çevrimiçi sosyal karşılaştırma arasındaki ilişkiyi incelemiş ve aralarında negatif bir ilişki olduğunu belirtmiştir. Coyne ve diğerleri de (2017) benzer bir bulgu rapor etmiştir. Bütün bunlar göz önünde bulundurulduğunda, çevrimiçi sosyal karşılaştırma, EÖY ve ruh sağlığı arasında bir zincir olduğu iddia edilebilir.

EÖY'nin öneminin farkına varılması, nasıl artırılabileceği sorusunu gündeme getirmiştir. Sosyal destek bu konuda değerli bir kaynaktır; çünkü EÖY inançlarını geliştirmenin bir yolu sözlü iknadır (Bandura, 1997). Örneğin, Tek'in (2021) okul öncesi çağdaki çocukların anneleri üzerinde yaptığı araştırmaya göre, algılanan sosyal destek ile öz yeterlik arasında pozitif bir ilişki vardır. Ayrıca, algılanan sosyal desteğin doğum sonrası depresyon (Dennis ve Ross, 2006; Gan vd., 2019; Jamshaid vd., 2023) ve ebeveynlik stresi ile negatif (Hong ve Liu, 2019), EÖY ve annenin iyi olma hali ile de pozitif ilişkili olduğu bulunmuştur (Balaji vd., 2007; Leahy-Warren vd., 2012). Son olarak Coyne ve diğerleri (2017) algılanan sosyal destek ve çevrimiçi sosyal karşılaştırma eğilimi arasında negatif ilişki bulmuştur. Anlaşılacağı üzere, sosyal destek anneler için işlevseldir ve desteklendiklerini hissetmek doğum sonrası dönemde düşük EÖY'ye bağlı olarak ortaya çıkabilecek olumsuz sonuçları azaltmaya yardımcı olabilir.

Çevrimiçi sosyal karşılaştırma, algılanan sosyal destek ve EÖY ile negatif olarak ilişkilidir (Coyne et al, 2017; Ouvrein, 2022). EÖY ise algılanan sosyal destek ile pozitif olarak ilişkilidir (Leahy-Warren vd., 2012). Bu bulgulara dayanarak, algılanan sosyal desteğin bu ilişkide bir aracı olabileceği düşünülebilir.

1.1. Araştırmanın Amacı ve Sorusu

Bu çalışmanın amacı, Türk annelerin algılanan sosyal destek düzeylerinin, çevrimiçi sosyal karşılaştırma ile EÖY düzeyleri arasındaki ilişkide aracılık rolünü araştırmaktır. Bu doğrultuda cevap aranan temel araştırma sorusu şudur:

Türkiye'de yaşayan anneler örnekleminde algılanan sosyal destek düzeyi, çevrimiçi sosyal karşılaştırma ve EÖY arasındaki ilişkiye ne ölçüde aracılık etmektedir?

1.2. Araştırmanın Önemi

Yapılan çalışmalar sosyal medyanın en çok kullanıldığı zamanlardan birinin doğumdan hemen sonra olduğunu göstermiştir (Tomfohrde ve Reinke, 2016). Annelerin sosyal medya kullanımı, algılanan sosyal destek düzeyi ve annenin iyi olma hali arasında olumlu bağlantılar olduğunu gösteren bulgular olsa da (Lei vd., 2022; Mcdaniel vd., 2012), Glatz ve Buchanan (2021) boylamsal çalışmalarında sosyal medyanın yıllar içinde EÖY puanlarını düşürebilecek bir faktör olduğunu bulmuştur. Sosyal medyadaki içeriklerin anneler üzerindeki etkisi dikkat çeken yeni bir konu olduğundan, annelerin SAS'lerdeki sosyal karşılaştırma eğilimini doğrudan araştıran kısıtlı çalışma mevcuttur. Bu çalışmalarda, SAS'lerde sosyal karşılaştırma ile annelerin ruh sağlığı veya ebeveynlik tükenmişliği arasında ilişki bulunmuştur (Coyne vd., 2017; Henderson vd., 2015; Moujaes ve Verrier, 2020; Padoa vd., 2018). Daha önce de bahsedildiği gibi, bu ruh sağlığı sonuçları EÖY ile de ilişkilidir. Dolayısıyla, çevrimiçi sosyal karşılaştırmanın annelerin EÖY inançlarına olumsuz katkıda bulunduğu ve bunun da olumsuz ruh sağlığı sonuçlarına yol açtığı öne sürülebilir. Bu varsayım göz önünde bulundurularak, bu çalışmanın bulguları, Türkçe alanyazında doğrudan çalışılmamış olan çevrimiçi sosyal karşılaştırma ve EÖY arasında herhangi bir ilişki olup olmadığını anlamaya yardımcı olacaktır. Bu ilişkinin anlaşılması sayesinde, çevrimiçi sosyal karşılaştırma eğilimini, EÖY ile ilişkili faktörlerden biri olarak ele alarak daha iyi ebeveynlik müdahale programı içeriği geliştirmek mümkün olabilir.

Önceki araştırmalar, sosyal desteğin doğum sonrası dönemin olumsuz ruh sağlığı sonuçlarını azaltmada ve anneler arasında EÖY'yi iyileştirmede çok önemli olduğunu göstermiştir (Leahy-Warren vd., 2012). Ayrıca, Leahy-Warren ve meslektaşları (2012) daha yüksek düzeyde sosyal destek alan annelerin doğum sonrası depresyon yaşama olasılığının daha düşük olduğunu ve bunun da sonuçta daha iyi annelik uygulamaları ve deneyimleri ile sonuçlanabileceğini bulmuştur. Angley vd. de (2015) EÖY ile algılanan sosyal destek arasında pozitif bir ilişki olduğunu ileri sürmüştür. Bu olumlu sonuçlarına ek olarak, algılanan sosyal destek ve EÖY inançları, evde daha iyi öğrenme faaliyetleriyle olumlu yönde ilişkilidir ve ebeveynlik stresine karşı koruyucu faktörler olarak bulunmuştur (Oppermann vd., 2021). Anlaşılacağı üzere, ebeveynlik sürecinde algılanan sosyal desteğin ebeveynler ve sonuç olarak çocuklar için birçok olumlu etkisi vardır. Bu çalışmada algılanan sosyal desteğin aracı olarak düşünülmesinin nedeni, algılanan sosyal desteğin çevrimiçi sosyal karşılaştırma ile negatif (Coyne vd.,2017), EÖY ile pozitif bir ilişkiye sahip olduğuna dair bulgulardır (Angley vd., 2015; Leahy-Warren vd., 2012). Bu değişkenler arasındaki ilişki mekanizmasının açıklığa kavuşturulması, algılanan sosyal desteğin çevrimiçi sosyal karşılaştırmalar yapma riskini ve düşük ebeveynlik öz yeterliliğinin olumsuz sonuçlarını azaltmadaki önemli rolünün anlaşılmasına yardımcı olabilir.

Ebeveyn olmak, sevgi, neşe, tatmin, amaç, sorumluluk ve belirsizliği içeren eksiksiz bir deneyim olabilir. Sadece olumlu boyutlara sahip bir deneyim bulmak zordur. EÖY, annenin iyi olma haline ve olumlu ebeveynlik uygulamalarına katkısı ile ebeveynliği daha tatmin edici hale getiren bir değişken olabilir. Daha yüksek yeterliğe sahip ebeveynler, sayısız baskı karşısında bile riskleri azaltmak ve çocuklarına tatmin edici deneyimler yaşatmak için çaba gösterirler (Elder, 1995). Jones ve Prinz (2005), yüksek EÖY'ye sahip ebeveynlerin, düşük EÖY'ye sahip ebeveynlere kıyasla karşılaştıkları sorunları daha olumlu ve yapıcı bir şekilde ele aldıklarını ve ebeveynlik sırasında sorunlarla başa çıkma kapasiteleri konusunda kendilerine daha fazla güvendiklerini belirtmiştir. Bugüne kadar yapılan çalışmalar, düşük algılanan EÖY'ye sahip olmanın anneler için olumsuz sonuçları olduğunu kanıtlamıştır. Ayrıca, çalışmalar yüksek EÖY inancının daha duyarlı, ilgili ve yumuşak ebeveynlik uygulamalarıyla ilişkili olduğunu göstermiştir (Glatz ve Buchanan, 2015). Bu bulgular ışığında, EÖY yalnızca anneler için değil, aynı zamanda çocuklar için de pozitif deneyimler içeren önemli bir kavram haline gelmektedir. Bu nedenle, EÖY'yi etkileyen ve EÖY ile bağlantılı faktörlerin

araştırılması, düşük EÖY'nin olumsuz sonuçlarını önlemek için önemlidir. Dolayısıyla bu çalışmanın bulguları ebeveynler ile çalışan ruh sağlığı çalışanlarına yardımcı olabilir.

Bütün bunlar birlikte değerlendirildiğinde, bu çalışmanın bulguları çevrimiçi sosyal karşılaştırma ve düşük EÖY inançlarına karşı koruyucu faktörlerin anlaşılmasına yardımcı olacaktır. Çevrimiçi sosyal karşılaştırma ve EÖY ile ilgili koruyucu faktörlerin anlaşılması sayesinde annelerin EÖY inançlarını artırmak için daha iyi müdahale programları geliştirmek mümkün olabilir.

Sosyal karşılaştırma ve EÖY'nin ya da EÖY ve sosyal desteğin incelendiği çalışmalar olsa da, tüm değişkenlerin birlikte analiz edilmesi ve algılanan sosyal desteğin EÖY ve çevrimiçi sosyal karşılaştırma ilişkisi arasındaki aracı rolünün incelenmesi hala üzerinde çalışılması gereken bir konudur. Bu çalışma, alanyazında tanımlanan çevrimiçi sosyal karşılaştırma ve EÖY arasındaki negatif ilişkinin nasıl açıklanabileceğine dair ışık tutarak, ruh sağlığı çalışanlarının SAS kullanan anneleri daha iyi ebeveynlik deneyimleri yaşamaları için desteklemelerine yardımcı olabilir.

Sonuç olarak, bu çalışma, gelecekteki çalışmalar için Türk anneler arasında çevrimiçi sosyal karşılaştırmanın doğrudan etkileri ve algılanan sosyal destek yoluyla dolaylı etkiler açısından EÖY'nin anlaşılmasını sağlamayı amaçlamaktadır.

2. YÖNTEM

2.1. Araştırma Deseni

Bu çalışma nicel araştırma olarak tasarlanmış ve değişkenler arasındaki ilişkiyi inceleyen ilişkisel araştırma yöntemi kullanılmıştır.

2.2. Örneklem ve Katılımcılar

Bu çalışmanın örneklemini, okul öncesi çağda en az bir çocuğu olan, sosyal medya kullanan ve veri toplama sürecinde Türkiye'de yaşayan anneler oluşturmuştur ve katılımcılar kolayda örnekleme yöntemiyle seçilmiştir. Veri tarama sürecinden sonra 793 katılımcı kalmış ve çalışmanın analizleri bu katılımcılarla gerçekleştirilmiştir. Katılımcıların yaşları 23 ile 47 arasında değişmektedir (ort = 33.91, SS = 3.77). Annelerin % 96.1'i evli (n = 762), % 3.9'u (n = 31) ise bekârdır. Katılımcıların % 69.9'u lisans (n = 554), % 21.1'i lisansüstü (n = 167) ve % 9.1'i lise ve altı (n = 72) dereceye sahiptir. Çalışma durumu incelendiğinde, katılımcıların % 59.3'ünün tam zamanlı bir

işte çalıştığı (n=470), % 8.8'inin yarı zamanlı çalıştığı (n=70) ve % 31.9'unun ise çalışmadığı (n=253) anlaşılmıştır. Gelir düzeyi açısından, katılımcıların % 9.2'si düşük gelirli (n=73), % 56.6'sı orta gelirli (n=449), % 31.4'ü orta ila yüksek gelirli (n=249) ve % 2.8'i yüksek gelirlidir (n=22). Katılımcıların % 58.5'inin bir çocuğu (n=464), % 36.8'inin iki çocuğu (n=292) ve % 4.2'sinin üç ve daha fazla çocuğu (n=37) vardır. Katılımcıların internette her gün harcadıkları günlük süre bir ila on saat arasında değişmektedir (ort=2.50, SS=1.29). Sonuç olarak katılımcıların evli, çalışan, iyi eğitimli, orta gelirli ve çoğunlukla ilk kez anne olan kişilerden oluştuğu söylenebilir.

2.3. Veri Toplama Araçları

Bu çalışmada demografik bilgi formu, Iowa Hollanda Karşılaştırma Yönelim Ölçeği'nden yeniden düzenlenmiş üç madde, Çok Boyutlu Algılanan Sosyal Destek Ölçeği ve Ebeveyn Yetkinlik Ölçeği kullanıldı.

2.3.1. Demografik Bilgi Formu

Katılımcıların medeni durumu, yaşı, eğitim durumu, gelir düzeyi, çocuk sayısı ve yaşları ve internette harcadıkları süreye dair demografik bilgilerini edinmeyi amaçlayan form araştırmacı tarafından geliştirilmiştir.

2.3.2. Iowa Hollanda Karşılaştırma Yönelimi Ölçeği

Gibbons ve Buunk 1999 yılında Iowa Hollanda Karşılaştırma Yönelimi Ölçeğini (INCOM) geliştirmiştir. Ölçek 5'li Likert tipi bir ölçektir ve 11 maddeden oluşmaktadır. Katılımcılar görüşlerini (1) kesinlikle katılmıyorum ile (5) kesinlikle katılıyorum arasında derecelendirmektedir. INCOM'un Türkçe uyarlama çalışması Teközel (2000) tarafından gerçekleştirilmiştir. Ölçeğin tamamı için Cronbach alfa puanı .82 olarak bulunmuştur. Bu çalışma için, INCOM'dan üç madde annelerin sosyal ağ sitelerindeki sosyal karşılaştırma yönelimini ölçmek için yeniden ifade edilmiştir. INCOM'un yeniden ifade edilen üç maddesinin Cronbach alfa katsayısı .74 olarak hesaplanmıştır.

2.3.3. Çok Boyutlu Algılanan Sosyal Destek Ölçeği (ÇBASDÖ)

Çok Boyutlu Algılanan Sosyal Destek Ölçeği (ÇBASDÖ), Zimet ve arkadaşları (1988) tarafından geliştirilmiştir. Ölçek 12 maddeden oluşan 7'li Likert tipi bir ölçektir (1 = hiç katılmıyorum, 7 = tamamen katılıyorum).

ÇBASDÖ'nin Türkçe uyarlama çalışması ilk olarak Eker ve Arkar (1995) tarafından yapılmıştır. Eker ve arkadaşları (2001) ÇBASDÖ formunu 'önemli diğerleri' terimini parantez içinde belirterek revize etmiş ve faktör yapısının genellenebilirliğini kanıtlamak için başka bir çalışma daha yürütmüştür. Sonuçlara göre Cronbach alfa katsayısı .89 olarak bulunmuş ve ilkiyle aynı faktör yapısını göstermiştir. Bu çalışmada ise toplam Cronbach alfa katsayısı .91 olarak bulunmuştur.

2.3.4. Ebeveyn Yetkinlik Ölçeği (EYÖ)

Ebeveyn Yetkinlik Ölçeği (EYÖ) Caprara ve diğerleri (2004) tarafından geliştirilmiştir. Ölçek, (1) son derece yetersiz ile (7) son derece yeterli arasında değişen 12 maddeden oluşan tek boyutlu, 7 puanlı Likert tipi bir derecelendirme ölçeğidir.

Demir ve Gündüz (2014), Türk anneler arasında EYÖ'nin bir uyarlama çalışmasını gerçekleştirmiştir. Analizleri, uyarlanan ölçeğin 11 madde ile tek boyutlu olduğunu göstermektedir. İç tutarlılık için Cronbach alfa katsayısı .92 olarak bulunmuştur. Testtekrar test çalışmaları iki hafta arayla gerçekleştirilmiştir. Güvenirlik puanı .94 olarak bulunmuştur. Bu çalışmada ise ölçeğin Cronbach alfa katsayısı .87 olarak bulunmuştur.

Ölçeklerin mevcut örneklemle model uyumu Mplus 7 programı aracılığıyla doğrulayıcı faktör analizi (DFA) yapılarak test edilmiş ve uyumlu oldukları görülmüştür.

2.4. Veri Toplama Süreci

Veriler METU survey üzerinde hazırlanan formun sosyal medya platformlarında paylaşılmasıyla Ağustos 2022 - Eylül 2022 tarihleri arasında çevrimiçi olarak toplanmış ve kartopu tekniğinden yararlanılmıştır. Anket linkine tıklayan katılımcı ilk olarak çalışma hakkında bilgi ve çalışmanın gizliliği ve anonimliğine ilişkin güvence içeren bilgilendirilmiş onam formunu görmüştür. Gönüllü katılım için sayfanın sonuna bir onay butonu yerleştirilmiştir. Çalışmaya katılmayı kabul eden katılımcıların ankete devam etmesine izin verilmiştir. Cevaplar gönderildikten sonra araştırmayı destekledikleri için katılımcılara teşekkür edilmiştir.

2.5. Verilerin Analizi

Betimsel analizler ve güvenilirlik analizleri için IBM SPSS 25 paket programından faydalanılmıştır. Değişkenler arasındaki ilişkiyi test edebilmek amacıyla Pearson

korelasyon katsayısı hesaplanmıştır. Varsayımlar kontrol edildikten sonra temel araştırma sorusunun yanıtını bulabilmek amacıyla SPSS'de PROCESS Makro kullanılarak basit aracılık analizi yapılmıştır. Ölçeklerin mevcut örneklemle model uyumunu test edebilmek amacıyla Mplus 7 programı aracılığıyla DFA yapılmıştır.

2.6. Araştırmanın Kısıtlılıkları

Bu çalışmanın çeşitli sınırlılıkları vardır. Örnekleme yöntemi bu çalışmanın ilk sınırlılığı olabilir. Bu araştırmada kolayda örnekleme yöntemi kullanılmıştır. Bu durum araştırmanın dış geçerliliğini ve genellenebilirliğini azaltabilir. Araştırmanın katılımcıları çoğunlukla evli, iyi eğitimli, orta gelirli ve çalışan annelerdir. Dolayısıyla çalışmanın sonuçları mevcut katılımcı profilini temsil etmekle sınırlıdır ve sonuçların genellenebilirliği düşüktür. Ayrıca, veriler çevrimiçi olarak toplanmıştır. Veri toplama sürecinde katılım kriterleri vurgulanmıştır, ancak katılımcıların bu kriterlere tam olarak uyduğuna emin olunamamaktadır.

Ek olarak, tüm ölçekler öz bildirim ölçekleri olduğundan, bu çalışmanın sonucu katılımcıların sosyal arzu edilebilirlik dürtülerinden etkilenebilir. Ayrıca, çalışma korelasyonel bir tasarıma sahip olduğundan, değişkenler arasındaki neden-sonuç ilişkisine işaret etmemektedir (Fraenkel vd., 2012). Son olarak, karıştırıcı değişkenler, örneğin özel ihtiyaçları olan bir çocuğa sahip olmak, sabit tutulmaya çalışılmış olsa da çalışma sonuçlarını etkileyebilecek başka karıştırıcı değişkenler (örneğin, ustalık deneyimleri) olabilir.

3. BULGULAR

Pearson korelasyon katsayısının incelenmesi neticesinde sonuçlar, çevrimiçi sosyal karşılaştırma ile algılanan sosyal destek arasında anlamlı ve negatif bir korelasyon olduğunu ortaya koymuştur (r = -0.11, p < .01). Ayrıca, çevrimiçi sosyal karşılaştırma ile EÖY arasında anlamlı ve negatif bir korelasyon bulunmuştur (r = -0.28, p < .01). Son olarak, algılanan sosyal destek ile EÖY arasında anlamlı ve pozitif bir korelasyon gözlenmiştir (r = 0.27, p < .01). Çevrimiçi sosyal karşılaştırma ile EÖY arasındaki ilişkide algılanan sosyal desteğin aracılık rolü basit aracılık testiyle analiz edilmiştir. Sonuçlar çevrimiçi sosyal karşılaştırmanın EÖY üzerinde anlamlı bir dolaylı etkisi olduğunu ortaya koymuştur (β = -0.03, p < .01, %95 GA [-.04, -.01]). Ayrıca, sosyal karşılaştırmanın EÖY üzerindeki doğrudan etkisi de aracı değişken (algılanan sosyal destek) varlığında anlamlı bulunmuştur (β = -0.26, p < .01, %95 GA [-.32, -.20]).

4. TARTIŞMA

4.1. Bulguların Tartışılması

Bu çalışmada, çevrimiçi sosyal karşılaştırma ile EÖY arasındaki ilişkide algılanan sosyal desteğin aracılık rolü araştırılmıştır. Bu aracılık rolünü anlamak için basit bir aracılık analizi yapılmıştır. İlk olarak, değişkenler arasındaki korelasyonlar incelenmiş ve sonuçlar çevrimiçi sosyal karşılaştırma ile algılanan sosyal destek arasında negatif bir korelasyon olduğunu göstermiştir. Bu sonuç literatürle paralellik göstermektedir (örn. Coyne vd., 2017; Kirkpatrick ve Lee, 2022). Bu bulgunun olası bir açıklaması sosyal karşılaştırmanın sonuçları olabilir. Örneğin, sosyal karşılaştırmanın anneler arasında olumsuz ruh sağlığı sonuçları ve kaygı ile ilişkili olduğu bilinmektedir (Coyne vd., 2017; Moujaes ve Verrier, 2020; Kirkpatrick ve Lee, 2022). Bu açıdan bakıldığında, depresyon, anksiyete veya haset ve kıskançlık gibi zıt duygulara sahip bir kişinin bilişsel önyargılar nedeniyle sosyal desteği aldığından daha düşük olarak algılayabileceği düşünülebilir.

İkinci olarak, çevrimiçi sosyal karşılaştırma ve EÖY, Ouvrein'in (2022) sonuçlarıyla tutarlı ancak Germic ve arkadaşlarının (2021) deneysel çalışma bulgularıyla tutarsız olarak negatif ilişkili bulunmuştur. Dolaylı deneyimlerin önemi bu bulguyu açıklayabilir. Sosyal medya, modern dünyada dolaylı deneyimlerin kaynaklarından biridir. Ancak sosyal medyadaki annelik temsilleri, anneler için ulaşılması zor bazı normlar ve kültürel beklentiler ortaya koymaktadır. Bu normlara ulaşmada yaşanan zorluk deneyimi, annelerin kendilerini yetersiz hissetmeleriyle, bir başka deyişle daha düşük EÖY inancıyla ilişkili olabilir. Bu sonucun ikinci açıklaması, insanların SAS'lerde olumsuz anlardan çok olumlu anları paylaşma eğilimi olabilir (Padoa vd., 2018). İçerik oluşturucuların çoğu en iyi anlarını paylaşmakta, bu da ekran arkasındaki anneler açısından olumlu bir önyargıya neden olmaktadır (Wegener vd., 2022). Buradan yola çıkarak SAS'lerdeki annelik temsilinin daha gerçekçi olması, EÖY ile çevrimiçi sosyal karşılaştırma arasındaki ilişkiyi farklılaştırabilir.

Ayrıca, EÖY algılanan sosyal destekle pozitif yönde ilişkili bulunmuştur ve bu bulgu alanyazınla tutarlıdır (Angley vd., 2015; Leahy-Warren vd., 2012). Bu bulgu şaşırtıcı değildir çünkü; sosyal destek bir tür sözlü ikna yöntemidir ve EÖY inançlarını geliştirmenin yollarından biridir (Bandura, 1997; Gao vd., 2014; Leahy-Warren vd., 2012; Suzuki vd., 2009). Yeni ve ilk kez anne olanlar, bu geçiş döneminde yeni

rollerinde mücadele ederken sosyal destekten faydalanabilirler. Sosyal destek kaynaklarına sahip olmak, annelerin EÖY inançlarını ve annelerin iyi oluş halini desteklediği için değerlidir.

Son olarak, algılanan sosyal destek, çevrimiçi sosyal karşılaştırma ile EÖY arasındaki ilişkiye kısmi aracılık etmiştir. Bu durumun çevrimiçi sosyal karşılaştırma ile EÖY arasındaki negatif ilişkiyi açıkladığı söylenebilir. Bununla birlikte, çevrimiçi sosyal karşılaştırma ile EÖY arasındaki ilişkiyi açıklayabilecek başka değişkenlerin de olabileceği unutulmamalıdır. Algılanan sosyal destek puanları düşük olduğunda, çevrimiçi sosyal karşılaştırma ile EÖY arasındaki ilişki negatif yönde yüksek bulunmuştur. Ancak, algılanan sosyal destek puanları da bu ilişkiye aracı olarak dahil edildiğinde, çevrimiçi sosyal karşılaştırma ile EÖY arasındaki korelasyon katsayısı en düşük seviyeye inmiştir. Bu bulgu, bildiğimiz kadarıyla alanyazında bu değişkenlerin birlikte çalışılmamış olması nedeniyle bu çalışmanın en önemli bulgusu olabilir. Bu sonucun olası bir açıklaması, algılanan sosyal desteğin çevrimiçi sosyal karşılaştırma yapma ihtimalini düşürmesi olabilir. Algılanan sosyal desteğin annelerin çevrimiçi sosyal karşılaştırma yapma ihtimalini azaltması sebebiyle annelerin EÖY inançlarını artmasını sağladığı iddia edilebilir. Bu bulgu, anne sağlığını desteklemek için annelere sosyal destek sağlamanın önemini bir kez daha vurgulamıştır.

4.2. Uygulamaya Yönelik Öneriler

Bu çalışmanın ruh sağlığı çalışanları, sosyal politika yapıcılar ve içerik oluşturucular için çıkarımları olabilir.

İlk olarak, bu çalışma, EÖY ile pozitif, çevrimiçi sosyal karşılaştırma ile negatif korelasyon göstermesi nedeniyle sosyal desteğin oldukça önem taşıdığını göstermiştir. Ruh sağlığı çalışanları, annelerin sosyal desteğini artırmak için anne çemberlerine liderlik etmeyi düşünebilir. Annelik çeşitli açılardan tartışılmalıdır, ancak kutsiyet atfedilen bir rol olduğu için toplumda öncelikle olumlu şeyler konuşulmaya açıktır. Bu çemberler onlara kendilerini yargılanmış hissetmeyecekleri, zamanında hissettiklerini dürüstçe paylaşabilecekleri bir alan sunabilir. Ek olarak, ruh sağlığı çalışanları aile eğitim programları geliştirirken çalışma bulgularından faydalanabilir; çünkü bulgular annelerin SAS'leri dikkatli kullanma konusundaki farkındalıklarını ve dijital okuryazarlıklarını artırmanın önemine işaret etmektedir. Günümüz dünyasında SAS'leri kullanmamak sosyal karşılaştırmanın olumsuz sonuçlarını azaltmak için

seçeneklerden biri olmayabilir. Ancak, SAS'ler kullanılırken SAS'lerde para kazanmanın içeriğin gerçekliğini ve özgünlüğünü azalttığı göz önünde bulundurulmalıdır (Ouvrein, 2022).

Ayrıca, sosyal politika yapıcılar annelerin iyi oluş halini teşvik edecek ve ebeveynlik destek kaynaklarını artıracak programlar üzerinde düşünmeli, saha araştırması ve ihtiyaç değerlendirmesi yapılmasını teşvik etmelidir. Bu kaynaklar arasında psikolojik destek kaynakları ve araçsal kaynaklar yer alabilir. Örneğin, anne ve bebek taburcu olduktan sonra da önleyici çalışmalar yapılmalıdır. Doğum sonrası dönemde olumsuz deneyim risklerini ortadan kaldırmak için annelerin iyi olma hali takip edilmelidir. EÖY inançlarını teşvik etmek için doğumdan önce ve sonra eğitimler verilebilir. Bu eğitimler sayesinde anneler ebeveynlik becerileri konusunda kendilerine daha yeterli hissedebilirler. Ayrıca, babaların ebeveynlik sürecine katılımı ve annelerin sosyal destek kaynaklarını artırmak için babaların da bu ebeveynlik eğitim programlarına dahil edilmesi düşünülmelidir.

Annelerin ebeveynlik uygulamaları hakkında bilgi edinmek için çoğunlukla SAS'leri kullandıkları ve internette arama yaptıkları alanyazından bilinmektedir (Lupton, 2016; Newhouse & Blandford, 2016). Uzman rehberliğinin sosyal politika yapıcılar tarafından doğumdan sonra her anne için erişilebilir hale getirilmesi halinde, annelerin internette bilgi veya sosyal destek arama davranışlarının azalacağı düşünülebilir. Ayrıca, uzmanların rehberliği anneler için sosyal destek kaynağı olarak hizmet edebilir ve EYÖ inançlarını artırabilir.

Son öneri içerik oluşturuculara verilebilir. İzleyiciler üzerindeki etkilerinin farkında olmalı ve özellikle hedef kitleleri anneler ise içeriklerine dikkat etmelidirler. Coyne ve diğerleri (2017) ebeveynlikle ilgili gerçekçi içeriğe nadiren rastlandığını bildirmiştir. Bu nedenle, ebeveynlik sadece gerçek hayatta değil, SAS'lerde de tüm boyutlarıyla yansıtılmalıdır.

4.3. Gelecek Çalışmalar için Öneriler

Bu çalışma, araştırmanın değişkenlerine ilişkin önemli bulgularıyla alanyazına katkı sağlamaktadır. Bununla birlikte, sınırlılıklarına atıfta bulunarak, daha gelecek araştırmalar için önerilerde bulunulabilir.

Sosyal karşılaştırma yönelimi için bir ölçek olmasına rağmen, alanyazında çevrimiçi sosyal karşılaştırmayı ölçen bir ölçeğe rastlanmamıştır. Araştırmacılar, özellikle çevrimiçi sosyal karşılaştırma için bir ölçek geliştirmeyi düşünebilirler.

Bir başka öneri de çalışmanın metodolojisinin iyileştirilmesi olabilir. Bu nicel çalışma, katılımcıların öz bildirim ölçeklerine verdikleri yanıtlara dayanmaktadır. Annelerin sosyal karşılaştırma deneyimlerini daha geniş bir perspektiften görmek için nitel bir çalışma yapılabilir ya da karma bir yöntem kullanılabilir. Ayrıca, bu çalışma değişkenler arasındaki korelasyonları vurgulamakta ve neden-sonuç ilişkilerini göstermemektedir. Deneysel araştırma tasarlamak, değişkenler arasındaki nedensonuç ilişkisini tam olarak görmek için iyi bir yol olabilir.

Veri toplama prosedürü, geliştirilmesi önerilebilecek bir diğer boyuttur. Örneğin, bu çalışmadan elde edilen veriler kesitsel bir tasarımla toplanmıştır. Bu nedenle, çalışma bulgularının güvenilirliğini artırmak için çalışmanın farklı örneklemlerle tekrarlanması ve boylamsal çalışmalar yürütülmesi önemlidir. Ayrıca, bu çalışmada veriler çevrimiçi olarak toplanmıştır. Verilerin kâğıt-kalem yöntemiyle toplanması, katılımcı kriterlerinin ihlal edilmesi riskini azaltabilir. Ek olarak, bu çalışmada kolayda örnekleme yöntemi kullanıldığından örneklem temsiliyeti azalmıştır. Gelecekteki araştırmacılar örneklemin evreni temsil gücünü artırmak için farklı örnekleme yöntemleri deneyebilirler.

Diğer yordayıcı değişkenler de (örneğin çocuk sayısı) açıklanan varyansı artırabilir. Dolayısıyla gelecekteki araştırmacılar çalışmalarına başka değişkenleri de dahil etmeyi düşünebilirler. Ayrıca, çalışmanın babaları da örnekleme dahil ederek yürütülmesi ve sonuçların toplumsal cinsiyet rolleri ve kültürel bağlama atıfta bulunarak tartışılması özellikle tavsiye edilmektedir. Son olarak, gelecekteki çalışmalar bu çalışmada dikkate alınmayan bazı değişkenleri sabit tutabilir (örneğin, daha önce ebeveynlik programlarına katılmış olmak, çocuk sayısı vb.).

G. TEZ İZİN FORMU / THESIS PERMISSION FORM

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