



Parental Emotional Intelligence and Emotion Regulation in Children Aged 6–12: A Cross-Sectional Study

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Article Info

Article type:

Original Research

How to cite this article:

Nik Andish, M., Kianersi, N., Mohammadkhani, G., Asadzade, H., & Kalantari, E. (2026). Parental Emotional Intelligence and Emotion Regulation in Children Aged 6–12: A Cross-Sectional Study. *Health Nexus*, 4(2), 1-10.

<https://doi.org/10.61838/kman.hn.5351>



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ABSTRACT

Emotion regulation is a core developmental capacity that supports children's psychological adjustment, interpersonal functioning, school adaptation, and behavioral control. The family environment is one of the first contexts in which children observe, practice, and internalize emotional responses. Parents' emotional intelligence may therefore be associated with children's ability to understand, express, and regulate emotional experiences. This study examined the relationship between parental emotional intelligence and emotion regulation in children aged 6–12 years. The analysis focused on five components of parental emotional intelligence: self-awareness, self-regulation, self-motivation, empathy, and social skills. This applied, descriptive, cross-sectional survey study was conducted among parents of children aged 6–12 years in Tehran, Iran. Based on Cochran's formula for an unlimited population, 384 parents were included. Data were collected using a 33-item parental emotional intelligence questionnaire and a cognitive emotion regulation questionnaire. Data were analyzed in SPSS using descriptive statistics, bivariate correlation coefficients, and a multiple regression model summary. All five parental emotional intelligence components were positively and significantly associated with children's emotion regulation. The strongest reported correlation was observed for parental self-awareness ($r = .50$), followed by parental social skills ($r = .45$), self-motivation ($r = .41$), self-regulation ($r = .38$), and empathy ($r = .37$). The corrected multiple regression model showed $R = .470$ and $R^2 = .221$, indicating that the five parental emotional intelligence components jointly explained approximately 22.1% of the variance in children's emotion regulation. The findings suggest that higher parental emotional intelligence is associated with better emotion regulation among children aged 6–12 years. The results support the value of parent-focused educational and counseling programs that strengthen emotional awareness, self-regulation, empathy, and communication skills. Because the design was cross-sectional and correlational, the findings should not be interpreted as evidence of causality or direct prevention of clinical disorders.

Keywords: *Emotional Intelligence; Emotion Regulation; Parents; Children; Family; Psychological Adjustment*

1. Introduction

Childhood is a sensitive and formative period in which many cognitive, emotional, behavioral, and social

capacities begin to consolidate. Among these capacities, emotion regulation is especially important because it influences how children recognize emotions, respond to stress, tolerate frustration, communicate with others, and

adapt to social and educational demands. Emotion regulation has commonly been defined as the set of processes through which individuals monitor, evaluate, modify, maintain, or express emotions in ways that are appropriate to personal goals and situational demands (1, 2). From a developmental perspective, emotion regulation is not a single skill; it involves emotional awareness, modulation of arousal, flexible attention, cognitive appraisal, behavioral control, and social communication (3). Difficulties in emotion regulation during childhood can be associated with a wide range of emotional and behavioral problems, including anxiety, depressive symptoms, aggression, impulsivity, interpersonal conflict, and maladaptive coping. Children who have difficulty recognizing or managing emotional arousal may respond to frustration with avoidance, withdrawal, anger, or disruptive behavior. Conversely, children with stronger emotion-regulation skills are generally better able to tolerate distress, delay impulsive responses, use problem-solving strategies, and sustain more adaptive relationships with peers and adults. Contemporary evidence also suggests that emotion-regulation difficulties may contribute to the pathway from adverse experiences to psychopathology, which highlights the clinical and preventive relevance of emotion regulation as a developmental construct (4).

The family environment is one of the earliest and most influential contexts in which children learn emotional skills. Parents shape children's emotional development through several interconnected routes. First, children observe how parents express and manage their own emotions; this process of modeling can teach children whether emotions are manageable, acceptable, or overwhelming. Second, parents respond directly to children's emotions by validating, dismissing, punishing, coaching, or redirecting emotional expression. Third, the broader family emotional climate, including warmth, conflict, predictability, and communication style, can support or disrupt children's emotional competence. The tripartite model proposed by Morris and colleagues emphasizes modeling, parenting practices, and family emotional climate as major pathways through which the family context influences children's emotion regulation (5). Parental emotion socialization theory similarly emphasizes that parents' reactions to children's emotions, discussion of emotions, and expression

of emotion in the family contribute to children's emotional and social competence (6). When parents respond supportively to children's negative emotions, children may learn to label emotions, tolerate distress, and choose more adaptive responses. When parents respond with harshness, minimization, or inconsistency, children may become more emotionally reactive or may learn to suppress rather than regulate emotions. More recent developmental work has also argued that parents' own emotion and emotion regulation are critical targets for research and intervention because parents' internal emotional processes influence how they socialize children's emotions in everyday caregiving contexts (7).

In this context, parental emotional intelligence is a theoretically relevant factor. Emotional intelligence was initially conceptualized as a set of abilities related to the appraisal and expression of emotion, the regulation of emotion in oneself and others, and the use of emotion to facilitate thinking and action (8). Later theoretical developments described emotional intelligence as involving abilities such as perceiving emotions, using emotions to facilitate cognition, understanding emotional meanings, and managing emotions effectively (9). Although different ability-based and self-report models exist, applied studies often describe emotional intelligence through components such as self-awareness, self-regulation, self-motivation, empathy, and social skills. These components are highly relevant to parenting because they affect how parents recognize their own emotional states, respond to the child's emotional needs, manage conflict, and communicate within the family. A parent with greater self-awareness may be better able to recognize personal emotional triggers and understand how emotional reactions influence the child. A parent with stronger self-regulation may be less likely to respond impulsively during conflict or stress. A self-motivated parent may maintain patience, consistency, and constructive effort in emotionally demanding situations. Empathy may help parents recognize and validate children's emotional experiences. Social skills may support clearer communication, constructive conflict resolution, and emotionally supportive interaction. Research on emotional intelligence more broadly suggests that emotionally intelligent individuals tend to function more effectively in social and interpersonal contexts (10), and research focused

on parenting has shown that parental emotional intelligence is related to parenting style and parental competence (11).

Parental emotional intelligence may therefore be linked to children's emotion regulation through modeling, emotional coaching, communication quality, and the family's emotional atmosphere. Parents who manage their emotions effectively may provide children with more coherent and stable models of regulation. They may also be more able to teach children how to name feelings, understand emotional causes, generate alternative interpretations, and use constructive coping strategies. Conversely, parents with lower emotional intelligence may unintentionally model dysregulated responses such as emotional suppression, anger outbursts, excessive worry, avoidance, or inconsistent discipline. These patterns may make it more difficult for children to develop flexible and adaptive regulation strategies. Despite the theoretical relevance of this relationship, research on parental emotional intelligence and child emotion regulation still requires methodological caution. Some studies have examined parental emotion socialization, parental regulation, parenting style, and children's socio-emotional development, but fewer studies have examined the main components of parental emotional intelligence in relation to emotion regulation among children aged 6–12 years. This developmental period is important because children are increasingly exposed to school demands, peer relationships, performance expectations, and social comparison, while still relying heavily on parental guidance and family emotional climate. Understanding how parental emotional intelligence is associated with child emotion regulation may therefore inform parent education, family counseling, and school-family mental health programs.

The present study examined the association between parental emotional intelligence and emotion regulation in children aged 6–12 years. Unlike intervention or longitudinal designs, this study used a cross-sectional correlational approach; therefore, it does not test causality or

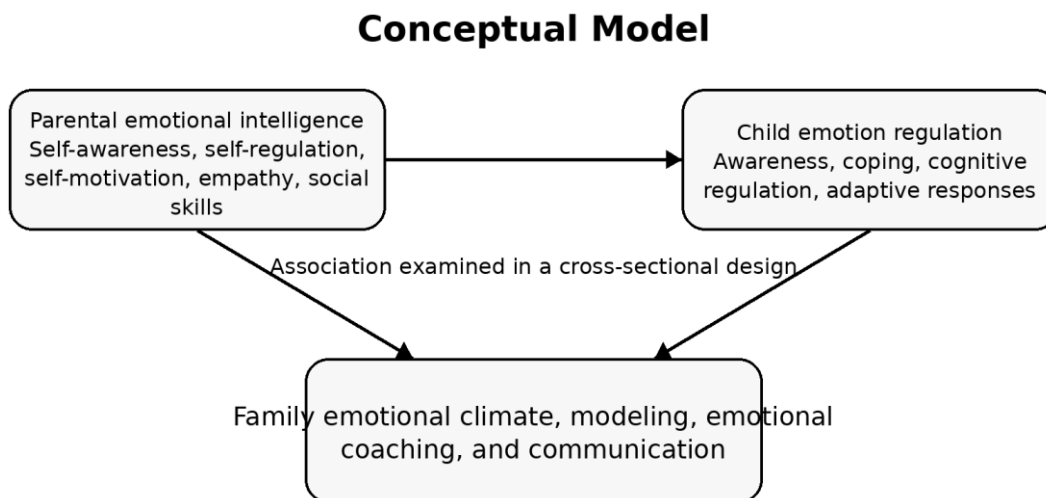
direct prevention. Instead, it evaluates whether parental emotional intelligence components are statistically related to children's emotion regulation. To improve conceptual and methodological precision, the study is framed in terms of association and statistical prediction rather than prevention of a clinical disorder. This distinction is important because the measurement tools used in the study assess emotional intelligence and emotion-regulation strategies, not diagnosed emotion-regulation disorders. Accordingly, the findings may be useful for identifying family-based correlates of children's emotional functioning, but they should not be interpreted as evidence that parental emotional intelligence alone prevents or treats emotional disorders in children.

2. Conceptual Framework

The conceptual framework of the study assumes that parental emotional intelligence may be associated with children's emotion regulation through several interrelated mechanisms. Parents with higher emotional intelligence may be more aware of their own emotional states, more capable of controlling impulsive reactions, more motivated to maintain positive family relationships, more empathic toward children's emotional needs, and more skilled in social communication. These parental capacities may create an emotional learning environment in which children are exposed to adaptive models of emotional expression and regulation. Over time, this environment may support children's ability to understand and regulate their own emotions. The model is consistent with family-context perspectives on emotion regulation, which emphasize observational learning, parenting practices, and emotional climate as pathways of influence (5). It is also consistent with parental emotion socialization theory, which proposes that children's emotional competence is shaped by parents' responses to emotions and by the emotional patterns that parents display in daily interactions (6, 7).

Figure 1

Conceptual model of the relationship between parental emotional intelligence and child emotion regulation.



Note. The figure presents the theoretical pathway tested indirectly through cross-sectional associations. It does not imply causal evidence.

3. Methods and Materials

3.1. Study Design and Participants

This was an applied, descriptive, cross-sectional survey study. The study examined statistical associations between parental emotional intelligence and emotion regulation in children aged 6–12 years. Because the design was cross-sectional and non-experimental, the results should be interpreted as correlational. The study did not include a training intervention, follow-up assessment, diagnostic interview, or clinical trial design; therefore, causal claims and strong claims about prevention are not warranted.

The statistical population consisted of parents of children aged 6–12 years living in Tehran, Iran. Based on Cochran’s formula for an unlimited population, the sample size was estimated as 384 participants. The original study protocol described the sampling approach as simple random sampling. Because the sampling frame was not fully documented in the source material, this point was treated cautiously in the interpretation of results. Eligible participants were parents of children in the specified age range who agreed to participate and completed the study questionnaires.

The available manuscript did not provide complete demographic details, such as parent gender, child gender,

child age distribution, parental education, socioeconomic status, or family structure. These omissions limit the ability to evaluate group composition and the generalizability of findings. The present rewritten version therefore avoids unsupported claims about demographic representativeness.

3.2. Measures

Parental emotional intelligence was assessed using the 33-item emotional intelligence questionnaire described in the original protocol as the Schering Emotional Intelligence Questionnaire. Because the instrument was described as a 33-item self-report scale and was conceptually aligned with the emotional intelligence framework, the reference list includes the verified 33-item emotional intelligence measure developed by Schutte and colleagues (1998) (12), along with the theoretical emotional intelligence literature (8, 9). The questionnaire assessed five components: self-awareness, self-regulation, self-motivation, empathy, and social skills. Responses were scored on a five-point Likert-type scale, and higher scores indicated higher levels of the relevant emotional intelligence component.

In the present sample, internal consistency coefficients for the emotional intelligence components were acceptable. Cronbach’s alpha values were reported as .77 for self-awareness, .80 for self-regulation, .76 for self-motivation,

.79 for empathy, and .78 for social skills. These values suggest adequate reliability for research purposes. Child emotion regulation was assessed using a cognitive emotion regulation questionnaire based on the work of Garnefski and colleagues. The adult Cognitive Emotion Regulation Questionnaire was developed to assess cognitive coping strategies used after stressful or negative events (13), and later psychometric work supported its use in research on cognitive emotion regulation (14). Related work also introduced a child version for children aged 9–11 years (15). The available study protocol reported adaptive cognitive strategies, including positive refocusing, refocus on planning, acceptance, and positive reappraisal. Items were rated on a five-point Likert-type scale from 1 to 5, with higher scores indicating greater use of the relevant emotion-regulation strategies. Because the sample included children aged 6–12 years, age-appropriateness of the child emotion-regulation measure is an important methodological issue. The available manuscript did not clearly state whether the questionnaire was completed directly by children, completed by parents as proxy-report, or administered with researcher assistance. This limitation is acknowledged in the Discussion, and the findings are interpreted as preliminary correlational evidence rather than definitive measurement of clinical emotion-regulation disorder.

3.3. Data Analysis

Data were analyzed using SPSS. Descriptive statistics, including mean, standard deviation, minimum, and maximum values, were used to summarize the parental emotional intelligence components. Bivariate correlation coefficients were used to examine the associations between each component of parental emotional intelligence and child emotion regulation. A multiple regression model summary

was also reported to examine the combined association between the parental emotional intelligence components and child emotion regulation.

The original results tables inconsistently referred to Pearson and Spearman correlations. Because the final SPSS output was not available in the uploaded manuscript, the results are reported as bivariate correlation coefficients without overclaiming the specific test type. With the reported sample size, the correlations between parental emotional intelligence components and child emotion regulation were statistically significant at conventional levels. For the model summary, the originally reported values contained an internal inconsistency: R was reported as .470, whereas R² was reported as .720. Because R² is the square of R, an R value of .470 corresponds to R² = .221. Therefore, the model summary was corrected to R = .470 and R² = .221. The adjusted R² and F statistic were recalculated using n = 384 and five predictors.

4. Findings and Results

Table 1 presents the available descriptive statistics for the five parental emotional intelligence components and their bivariate associations with child emotion regulation. Among the components, self-regulation had the highest mean score (M = 4.07, SD = 0.74), followed by self-awareness (M = 4.05, SD = 0.82), empathy (M = 3.61, SD = 0.60), social skills (M = 3.58, SD = 1.12), and self-motivation (M = 3.20, SD = 0.56). The highest variability was observed for social skills, while the lowest variability was observed for self-motivation. The source dataset did not provide descriptive statistics for the total child emotion regulation score; therefore, the table reports only the available descriptive statistics and the reported correlations with child emotion regulation.

Table 1

Descriptive statistics for parental emotional intelligence components and their correlations with child emotion regulation.

Variable	Mean	SD	Minimum	Maximum	Correlation with child emotion regulation
Self-awareness	4.05	0.82	1	5	.50***
Self-regulation	4.07	0.74	1	5	.38***
Self-motivation	3.20	0.56	1	5	.41***
Empathy	3.61	0.60	1	5	.37***
Social skills	3.58	1.12	1	5	.45***

Note. *** p < .001. Correlations were reported as statistically significant in the original analysis and are presented here using the corrected reporting format.

The bivariate analyses showed that all five components of parental emotional intelligence were positively associated with child emotion regulation. The strongest association was found between parental self-awareness and child emotion regulation ($r = .50, p < .001$). Parental social skills also showed a positive association with child emotion regulation ($r = .45, p < .001$), followed by self-motivation ($r = .41, p < .001$), self-regulation ($r = .38, p < .001$), and empathy ($r = .37, p < .001$). Overall, the pattern of results indicates that higher parental emotional intelligence scores were

associated with better child emotion regulation scores. Table 2 presents the intercorrelation matrix among parental emotional intelligence components. Self-awareness was positively correlated with self-regulation, self-motivation, and social skills. Self-regulation was positively correlated with empathy, social skills, and self-motivation. Empathy showed its strongest association with social skills. These findings suggest that the components are related but not identical constructs.

Table 2

Intercorrelations among parental emotional intelligence components.

Variable	1	2	3	4	5
1. Self-awareness	1				
2. Self-regulation	.35***	1			
3. Self-motivation	.49***	.14**	1		
4. Empathy	.09	.28***	.07	1	
5. Social skills	.35***	.27***	.14**	.51***	1

Note. ** $p < .01$, *** $p < .001$. Non-marked coefficients were not statistically significant at $p < .05$ based on the reported sample size.

A multiple regression model summary was used to examine the combined association of the parental emotional intelligence components with child emotion regulation. The corrected model summary is presented in Table 3. The model showed a multiple correlation of $R = .470$. The corrected coefficient of determination was $R^2 = .221$, indicating that the five parental emotional intelligence components jointly

explained approximately 22.1% of the variance in child emotion regulation. This represents a meaningful but moderate combined association in the context of family and developmental research, where child outcomes are typically influenced by multiple individual, familial, and social factors.

Table 3

Corrected multiple regression model summary for parental emotional intelligence components predicting child emotion regulation.

Model	R	R ²	Adjusted R ²	F	p
Parental emotional intelligence components	.470	.221	.211	21.44	< .001

Note. The original table reported $R = .470$ and $R^2 = .720$. Because R^2 must equal the square of R , the R^2 value was corrected to .221. Adjusted R^2 and F were recalculated using $n = 384$ and five predictors.

The Bonferroni comparisons indicated significant changes from pretest to posttest and from pretest to follow-up for all outcomes, whereas posttest-to-follow-up differences were not significant. This suggests that the improvements observed after the ACT intervention were maintained over the two-month follow-up period. Overall, the results support the effectiveness of ACT for reducing pain catastrophizing and psychological inflexibility and for

increasing pain self-efficacy in individuals with chronic pain.

5. Discussion

The present study examined the relationship between parental emotional intelligence and emotion regulation in children aged 6–12 years. The findings showed that all five components of parental emotional intelligence—self-awareness, self-regulation, self-motivation, empathy, and

social skills—were positively associated with children’s emotion regulation. These results suggest that parents’ emotional capacities may be meaningfully related to children’s emotional development, although the cross-sectional design does not allow causal conclusions. The strongest association was observed between parental self-awareness and child emotion regulation. Self-awareness is a central component of emotional intelligence because it allows individuals to recognize their own emotional states, identify emotional triggers, and understand how emotions influence behavior (8, 9). In the parenting context, self-awareness may help parents respond to children more thoughtfully rather than reactively. Parents who recognize their own anger, frustration, worry, or fatigue may be better able to pause before responding, communicate more clearly, and model emotional reflection. Children exposed to this pattern may learn that emotions can be noticed, named, and managed rather than ignored or expressed impulsively. This interpretation is consistent with family-context models indicating that children learn emotion regulation partly through observation and modeling of parental behavior (5). Parental social skills also showed a meaningful positive association with child emotion regulation. Social skills involve communication, relationship management, cooperation, and constructive handling of interpersonal situations. In family life, these skills may influence the quality of parent-child dialogue, conflict resolution, and emotional support. Parents with stronger social skills may be more able to listen to children’s emotional concerns, explain boundaries calmly, and guide children through social or emotional challenges. Such interactions can help children internalize more adaptive strategies for managing frustration, disappointment, fear, and interpersonal conflict. This is aligned with parental emotion socialization theory, which emphasizes that parents’ supportive responses and communication about emotions contribute to children’s emotional competence (6, 7).

Self-motivation was another component positively associated with child emotion regulation. Self-motivated parents may demonstrate persistence, optimism, and goal-directed coping in difficult situations. These characteristics can influence the family emotional climate by encouraging problem solving rather than helplessness or avoidance. Children may observe how parents remain engaged during

challenges, recover from setbacks, and continue working toward constructive outcomes. Through this modeling process, children may gradually develop greater tolerance for emotional discomfort and a stronger capacity to regulate emotions in the service of longer-term goals. Research on emotional intelligence suggests that emotional abilities are relevant to adaptive interpersonal and achievement-related functioning (10), which may help explain why parental motivational and emotional capacities are related to children’s regulation.

The association between parental self-regulation and child emotion regulation is also theoretically important. Parents who can regulate their own emotional responses are less likely to display uncontrolled anger, harsh reactions, or inconsistent discipline in emotionally charged situations. This does not mean that emotionally intelligent parents never experience distress; rather, they may be better able to manage distress in a way that is understandable and less threatening to the child. A calm and predictable parental response can provide children with a sense of safety and can help them learn how to down-regulate intense emotional arousal. Conversely, frequent parental dysregulation may increase children’s emotional insecurity and reduce opportunities for learning adaptive regulation. This interpretation is consistent with research emphasizing parents’ own emotional experience and regulation as a proximal factor in emotion socialization (7).

Empathy was also positively associated with child emotion regulation. Empathic parents are more likely to notice children’s emotional cues, validate their emotional experiences, and respond in ways that match the child’s developmental needs. Validation does not mean permissiveness; rather, it communicates to the child that emotions are understandable and can be managed. When children feel understood, they may become more willing to discuss emotions and accept guidance from parents. Empathic parenting may therefore support emotional labeling, emotional acceptance, and constructive coping. This finding is also compatible with recent evidence that parental emotional intelligence is related to parenting style and parental competence (11).

Taken together, these findings support the broader view that children’s emotion regulation develops within a relational context. Emotional development is not only an

individual process; it is shaped by repeated interactions between children and caregivers. Parents provide children with emotional language, behavioral models, coping strategies, and feedback about whether emotions are acceptable, manageable, or dangerous. Emotional intelligence may strengthen the quality of this process by improving parents' ability to understand themselves, understand their children, communicate effectively, and maintain supportive emotional relationships. Research on emotional intelligence in parents and offspring also suggests that parental emotional capacities can be meaningfully related to emotional abilities across generations (16).

The corrected regression model indicated that parental emotional intelligence components jointly explained approximately 22.1% of the variance in child emotion regulation. This is a meaningful proportion in psychological and family research. However, it also indicates that most of the variance in child emotion regulation remains unexplained by parental emotional intelligence alone. Other factors may include child temperament, age, gender, neurodevelopmental characteristics, peer relationships, parenting style, parental mental health, family stress, socioeconomic status, school environment, and broader cultural influences. Accordingly, parental emotional intelligence should be understood as one relevant correlate within a larger developmental system rather than as a single determining factor.

The findings have practical implications for parent education, family counseling, and school-family mental health programs. Parent education programs may benefit from including modules on emotional awareness, impulse control, empathy, communication, and constructive problem solving. Family counselors and school psychologists may also assess parental emotional skills when working with children who show difficulties in emotion regulation. Social-emotional learning programs in schools can also benefit from family involvement, because emotion-regulation skills are reinforced more effectively when school-based learning is supported by consistent emotional communication at home (17). However, because this study was correlational, these implications should be framed as recommendations for future program development rather than proof of intervention effectiveness.

Several limitations should be considered. First, the study used a cross-sectional design, which prevents conclusions about directionality or causality. It is possible that emotionally regulated children influence parental responses, that emotionally intelligent parents support children's regulation, or that both are influenced by other family-level or child-level factors. Second, the study relied on questionnaire data, which may be affected by self-report bias, social desirability, and shared method variance. Third, the sampling method requires cautious interpretation because the available manuscript did not provide enough information to confirm a true simple random sampling frame. Fourth, demographic information was incomplete, including parent gender, child gender, child age, parental education, socioeconomic status, and family structure. These variables are important for evaluating generalizability and potential confounding. Fifth, the administration procedure for the child emotion-regulation measure was not fully described, which is particularly important because the sample included children as young as six years old. Sixth, the original regression results were incomplete and contained an inconsistency between R and R^2 , which was corrected mathematically in the present revision.

Future research should use longitudinal designs to examine whether parental emotional intelligence predicts later changes in child emotion regulation. Experimental or quasi-experimental intervention studies are also needed to determine whether training parents in emotional intelligence skills leads to measurable improvements in children's emotional functioning. Future research should include both mothers and fathers where possible and analyze whether maternal and paternal emotional intelligence have similar or different associations with child outcomes. Studies should also examine mediating variables such as parenting style, parental emotion socialization, family emotional climate, and parent-child communication quality. Finally, future studies should use age-appropriate and validated measures of child emotion regulation and should consider multiple informants, including parents, children, and teachers. Combining questionnaire data with observational measures would strengthen validity.

6. Conclusion

The present study found positive associations between parental emotional intelligence and emotion regulation in children aged 6–12 years. All five components of parental emotional intelligence—self-awareness, self-regulation, self-motivation, empathy, and social skills—were significantly related to children’s emotion regulation, with self-awareness and social skills showing the strongest reported associations. The corrected regression model suggested that these components jointly explained approximately 22.1% of the variance in child emotion regulation.

These findings suggest that parents’ emotional capacities may be an important family-related correlate of children’s emotional development. Parent-focused educational and counseling programs may benefit from strengthening emotional awareness, self-regulation, empathy, and communication skills. Nevertheless, the findings should be interpreted cautiously because the study was cross-sectional and correlational. Further longitudinal and intervention-based research is needed before firm conclusions can be made about prevention or causal effects.

Authors’ Contributions

Milad Nik Andish contributed to conceptualization, literature review, and drafting of the manuscript. Nafise Kianersi contributed to methodological development, questionnaire coordination, and interpretation of emotional intelligence constructs. Ghazaleh Mohammadkhani contributed to literature review, data organization, and drafting of the theoretical background. Horie Asadzade contributed to interpretation of positive psychology and family-related concepts and revision of the discussion. Elham Kalantari contributed to study supervision, final manuscript revision, correspondence, and approval of the final version. All authors reviewed and approved the final manuscript.

Declaration

Artificial intelligence tools were used only to support English-language editing, academic restructuring, citation placement, formatting, and improvement of clarity. The study design, data collection, statistical analysis,

interpretation of results, and final scientific responsibility remain entirely with the authors. No participant data were generated, fabricated, or altered by artificial intelligence.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

Acknowledgments

The authors thank all participating parents for their cooperation. The authors also acknowledge the individuals and institutions that facilitated access to participants and supported data collection.

Declaration of Interest

The authors report no conflict of interest.

Funding

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Ethics Considerations

The study was conducted in accordance with ethical principles for research involving human participants. Participants were informed about the purpose of the study, the voluntary nature of participation, confidentiality of responses, and their right to withdraw from the study at any stage. Informed consent was obtained before questionnaire completion. Because the study involved parents and information related to children, confidentiality and responsible handling of family-related data were considered essential. No institutional ethics approval code was reported in the uploaded study file.

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